HOOVER
TREATED WOOD PRODUCTS, INC.

February 24, 2011

Ms. Susan D. Mackert
Environmental Specialist II Senior, Northern Regional Office
Department of Environmental Quality
Commonwealth of Virginia
13901 Crown Court
Woodbridge, VA 22193-3801

Re: Permit Application For Reissuance Of VPDES Permit No. VA0088714, Hoover Treated Wood Products, Caroline County.

Dear Ms. Mackert:

The following permit application is being submitted as requested. Enclosed find the original application with a paper copy and an electronic (pdf) file as per your letter dated August 3, 2010.

Along with this permit renewal application Hoover is requesting that some test and sample requirements from the current permit be relaxed. Hoover's current permit requires that monitor wells 1, 3, 4, 9, 10, 11, 12, 13 & 14 be sampled every three months. Hoover is requesting that monitor wells 1, 4, 9, 10 & 13 be removed from any sampling requirements and that monitor wells 3, 11, 12 & 14 be sampled every six months. Past data as summarized in this application indicates that wells 1, 4, 9, 10 & 13 show significant improvement in Ammonia and Organic Carbon values and these values are at or near non-detectable limits. The other wells show consistent data and Hoover believes that every six month sampling will provide Hoover and the State with a representative picture of actual groundwater conditions.

Hoover is also requesting that all Biological Monitoring requirements be removed. Three (3) storm events have been tested with 2 outfalls each since the current permit started and five (5) storm events with 2 outfalls each where conducted with alternating test subjects on the previous permit. Since 4-15-2002 a total of twenty-two (22) acute test have been performed with all test results at 100% survival. Test indicates no toxins are present and have not been present for nine years.

Prior to permit finalization and before any request for public comment; Hoover is requesting a meeting to discuss this permit renewal. The meeting could either be in person or by conference call.

Sincerely,

Randy Edmondson
Manager of Engineering Services

cc: Tim Borris, Vice President of Operations

Mailing address: 154 Wire Road • Thomson, GA 30824
Shipping address: 1742 Warrenton Hwy. • Thomson GA, 30824
TEL (706) 595-7355 • FAX (706) 595-6600 • Web Address: http://www.FRTW.com

COMMONWEALTH of VIRGINIA

DEPARTMENT OF ENVIRONMENTAL QUALITY
NORTHERN REGIONAL OFFICE
13901 Crown Court, Woodbridge, Virginia 22193
(703) 583-3800 Fax (703) 583-3821
www.deq.virginia.gov

Douglas W. Domenech
Secretary of Natural Resources

David K. Paylor
Director

Thomas A. Faha
Regional Director

August 3, 2010

Mr. Tim Borris
Vice President - Operations
Hoover Treated Wood Products, Inc.
154 Wire Road NW
Thomson, GA 30824

Re: VPDES Permit No. VA0088714, Hoover Treated Wood Products, Caroline County

Dear Mr. Borris:

This letter is to remind you that your VPDES permit will expire on August 24, 2011. If you wish to continue discharging, you must reapply for a VPDES permit. The State Water Control Board's VPDES Permit Regulation requires that we receive a complete application at least 180 days before the existing permit expires. The deadline for submitting the application is February 24, 2011. Early submissions are encouraged and will better enable us to complete processing before permit expiration. The application forms and instructions are available on the DEQ website at: http://www.deq.virginia.gov/vpdes/permitfees.html Based on your current permit, your facility is required to submit the following forms: General Form 1, Form 2C, and Form 2F.

If you would like to request a waiver from any of the sampling or testing requirements in the application forms, please contact me prior to submitting your application or provide a thorough justification for the request when you submit your application. Failure to submit the waiver request by the 180 day application deadline may result in the waiver or administrative continuance of the permit being denied if the permit is not subsequently re-issued on time.

Upon completing the application, return the original, one paper copy, and an electronic copy to the Northern Regional Office at the above address.

There is no application fee for a regularly scheduled reissuance of an individual permit; that fee has been replaced by an annual permit maintenance fee which is to be paid by October 1 of each year. No permit will be reissued unless all maintenance fee payments are up to date.

DEQ has launched an e-DMR program that allows you to submit effluent data electronically. We expect every permittee to use e-DMR as permits are reissued and exceptions will only be allowed on a case by case basis. There are many benefits to both DEQ and the permittee when e-DMR is utilized for submissions:

1) Fewer revisions for data since the e-DMR program automatically flags omissions before the data is submitted;
2) Cost savings on postage, copying, and paper;
3) No concerns about using the most current DMR – e-DMR refreshes the required parameters automatically when changes are needed;
4) Submittals can be made on a timelier basis; and
5) Electronic signatures from multiple people are allowed and e-DMR can be accessed from multiple computer locations.

The following website provides details http://www.deq.virginia.gov/water/edmrfaq.html and our regional e-DMR administrator, Becky Vice at rebecca.vice@deq.virginia.gov or (703) 583-3922 can also assist you.

Please contact me at (703) 583-3853 or susan.mackert@deq.virginia.gov if you have questions.

Sincerely,

Susan D. Mackert
Environmental Specialist II Senior

cc: VA0088714 Reissuance File

Enc.: Public Notice Billing Information Form
VPDES Permit Application Addendum
Paperwork Reduction Act notice
Pollution Prevention Flyer

PUBLIC NOTICE BILLING INFORMATION

I hereby authorize the Department of Environmental Quality to have the cost of publishing a public notice billed to the Agent/Department shown below. The public notice will be published once a week for two consecutive weeks in accordance with 9 VAC 25-31-290.C.2.

Agent/Department to be billed: Mr. Tim Borris / Vice President Operations

Owner: Hoover Treated Wood Products, Inc.

Applicant's Address: 154 Wire Road

Thomson, GA 30824

Agent's Telephone Number: (706) 595-5058

Authorizing Agent: _____
Signature

VPDES Permit No.: VA0088714
Facility Name: Hoover Treated Wood Products

Please return to:

Susan Mackert
VA-DEQ, NRO
13901 Crown Court
Woodbridge, VA 22193-1453
Fax: (703) 583-3821

VPDES Permit Application Addendum

1. **Entity to whom the permit is to be issued:** Hoover Treated Wood Products, Inc.
   Who will be legally responsible for the wastewater treatment facilities and compliance with the permit? This may or may not be the facility or property owner.

2. **Is this facility located within city or town boundaries?** Y / (N)

3. **Provide the tax map parcel number for the land where the discharge is located.**
   See Attached

4. **For the facility to be covered by this permit, how many acres will be disturbed during the next five years due to new construction activities?** None

5. **What is the design average effluent flow of this facility?** None MGD
   For industrial facilities, provide the max. 30-day average production level, include units:
   Storm Water ONLY

   In addition to the design flow or production level, should the permit be written with limits for any other discharge flow tiers or production levels? Y / (N) Storm Water ONLY
   If "Yes", please identify the other flow tiers (in MGD) or production levels: _____
   Please consider the following questions for both the flow tiers and the production levels (if applicable): Do you plan to expand operations during the next five years? Is your facility's design flow considerably greater than your current flow?

6. **Nature of operations generating wastewater:**
   No Wastewater - Stormwater ONLY

   0 % of flow from domestic connections/sources
   Number of private residences to be served by the treatment works:

   0 % of flow from non-domestic connections/sources

7. **Mode of discharge:** ____Continuous ____Intermittent ____Seasonal
   Describe frequency and duration of intermittent or seasonal discharges:
   N/A Stormwater ONLY

8. **Identify the characteristics of the receiving stream at the point just above the facility's discharge point:**
   - ___ Permanent stream, never dry
   - ___ Intermittent stream, usually flowing, sometimes dry
   - ___ Ephemeral stream, wet-weather flow, often dry
   - ___ Effluent-dependent stream, usually or always dry without effluent flow
   - X Lake or pond at or below the discharge point Swamp
   - ___ Other: _____

9. **Approval Date(s):**
   O & M Manual May 1996 **Sludge/Solids Management Plan** N/A
   Have there been any changes in your operations or procedures since the above approval dates? Y / (N)

Hoover Treated Wood Products, Inc.
Milford, VA.
Tax Map Parcel #'s
VPDES Permit Application Addendum Item Number 3
VA0088714

#	Acreage	
56-8-3	3.00	
56-A-27	11.75	
56-7-A2	2.24	
56-7-A4	30.74	Building
56-8-1A	5.90	
56-8-2	6.90	
56-8-4	2.95	

Please print or type in the unshaded areas only.

Form Approved. OMB No. 2040-0086.

FORM 1 GENERAL

U.S. ENVIRONMENTAL PROTECTION AGENCY
GENERAL INFORMATION
Consolidated Permits Program
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER: F VAD988190021

LABEL ITEMS
- I. EPA I.D. NUMBER
- III. FACILITY NAME
- V. FACILITY MAILING ADDRESS
- VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of **bold-faced terms**.

SPECIFIC QUESTIONS	Mark "X" YES	NO	FORM ATTACHED
A. Is this facility a **publicly owned treatment works** which results in a **discharge** to **waters of the U.S.**? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a **concentrated animal feeding operation** or **aquatic animal production facility** which results in a **discharge** to **waters of the U.S.**? (FORM 2B)		X	
C. Is this a facility which currently results in **discharges** to **waters of the U.S.** other than those described in A or B above? (FORM 2C)	X		X
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a **discharge** to **waters of the U.S.**? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of **hazardous wastes**? (FORM 3)		X	
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	
J. Is this facility a proposed **stationary source** which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP: HOOVER TREATED WOOD PRODUCTS, INC.

IV. FACILITY CONTACT

A. NAME & TITLE *(last, first, & title)*	B. PHONE *(area code & no.)*
2 CLARK, CHRISTOPHER, OPERATIONS MANAGER	(804) 633-4393

V. FACILTY MAILING ADDRESS

A. STREET OR P.O. BOX: 3 18315 HOUSE DRIVE

B. CITY OR TOWN	C. STATE	D. ZIP CODE
4 MILFORD	VA	22514

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER: 5 18315 HOUSE DRIVE

B. COUNTY NAME: CAROLINE

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE *(if known)*
6 MILFORD	VA	22514	0033

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

VII. SIC CODES *(4-digit, in order of priority)*

A. FIRST	B. SECOND
7 2499 (specify) Wood Products, Not Elsewhere Classified	7 2491 (specify) Wood Preserving
C. THIRD	**D. FOURTH**
7 (specify)	7 (specify)

VIII. OPERATOR INFORMATION

A. NAME: 8 HOOVER TREATED WOOD PRODUCTS, INC.

B. Is the name listed in Item VIII-A also the owner? ☑ YES ☐ NO

C. STATUS OF OPERATOR *(Enter the appropriate letter into the answer box: if "Other," specify.)*

F = FEDERAL
S = STATE
P = PRIVATE
M = PUBLIC *(other than federal or state)*
O = OTHER *(specify)*

P (specify) Industrial Stormwater Only

D. PHONE *(area code & no.)*: A (706) 595-5058

E. STREET OR P.O. BOX: 154 WIRE ROAD N.W.

F. CITY OR TOWN: B THOMSON

G. STATE: GA

H. ZIP CODE: 30824

IX. INDIAN LAND: Is the facility located on Indian lands? ☐ YES ☑ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES *(Discharges to Surface Water)*	D. PSD *(Air Emissions from Proposed Sources)*
9 N VA0088714	9 P
B. UIC *(Underground Injection of Fluids)*	**E. OTHER *(specify)***
9 U	9 (specify)
C. RCRA *(Hazardous Wastes)*	**E. OTHER *(specify)***
9 R	9 (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers, and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS *(provide a brief description)*

This facility pressure treats purchased wood products (lumber, plywood and timbers) with waterborne fire retardant chemicals and waterborne preservative chemicals and then re-dries the wood utilizing diesel fired steam boiler dry kilns. Forklifts and material handling machines (stackers) are used to move and prepare wood for various processing steps. Materials are received and shipped primary by truck with some items handled by rail. A subpart W drip pad is utilized with the pressure treating activity. This facility generates no wastewater as all liquids are closed loop. Critical areas and materials are protected by roof. Stormwater contacting some sensitive areas is collected and introduced into the process as make-up water.

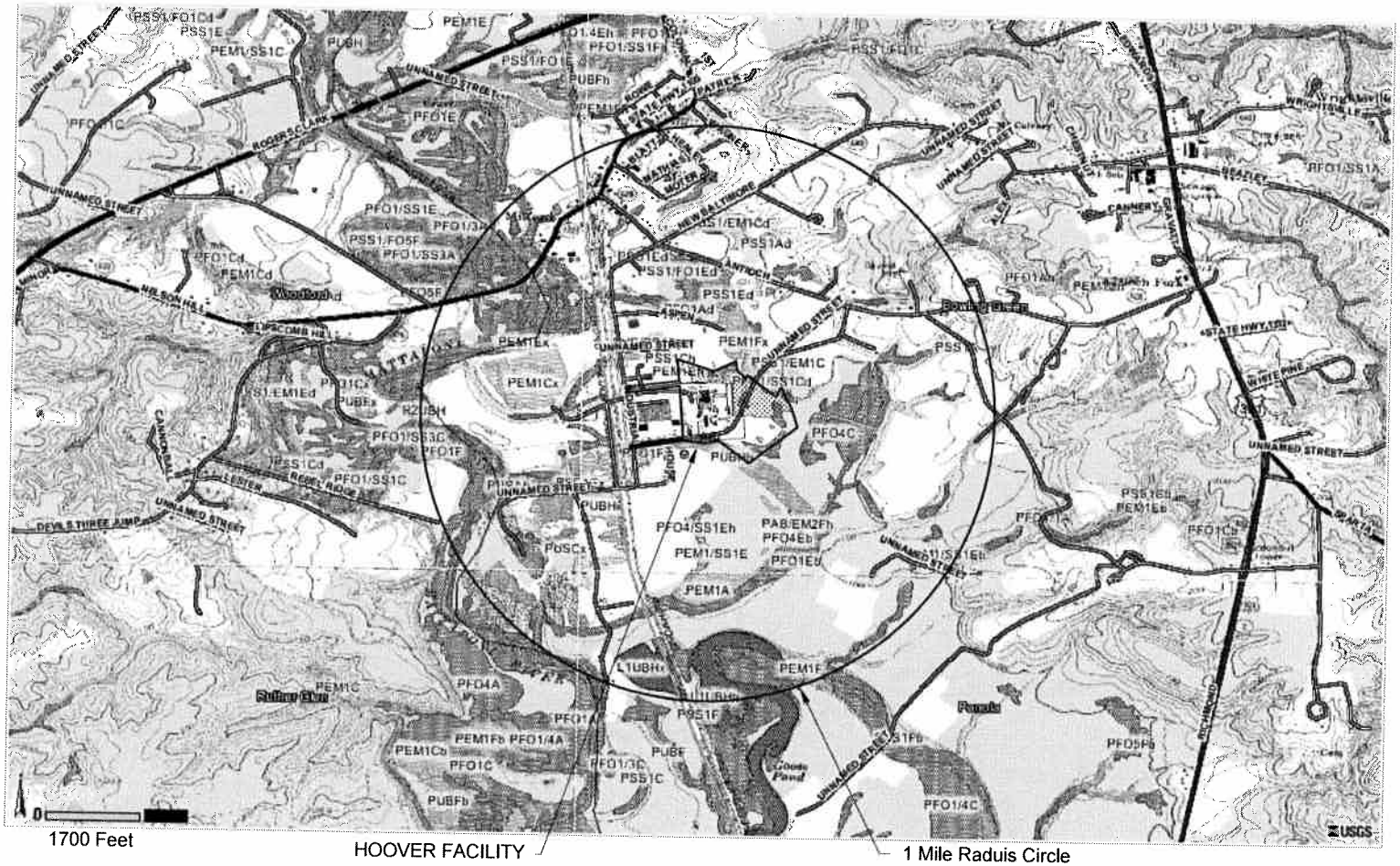
XIII. CERTIFICATION *(see instructions)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE *(type or print)*	B. SIGNATURE	C. DATE SIGNED
Randy Edmondson		2-24-2011

COMMENTS FOR OFFICIAL USE ONLY

C



HOOVER TREATED WOOD PRODUCTS, INC. VA0988190021

Please print or type in the unshaded areas only.

EPA I.D. NUMBER (*copy from Item 1 of Form 1*): VAD988190021

Form Approved.
OMB No. 2040-0086.
Approval expires 3-31-98.

FORM **2C** NPDES

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURE OPERATIONS
Consolidated Permits Program

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NUMBER (*list*)	B. LATITUDE			C. LONGITUDE			D. RECEIVING WATER (*name*)
	1. DEG.	2. MIN.	3. SEC.	1. DEG.	2. MIN.	3. SEC.	
01	38	0	40.89	77	21	57.53	Mattaponi River via un-named swamp
03	38	0	41.20	77	22	4.05	Mattaponi River via un-named swamp
04	38	0	30.20	77	21	58.73	Mattaponi River via un-named swamp
06	38	0	30.02	77	22	2.69	Mattaponi River via un-named swamp

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined (*e.g., for certain mining activities*), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

1. OUTFALL NO. (*list*)	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT		
	a. OPERATION (*list*)	b. AVERAGE FLOW (*include units*)	a. DESCRIPTION	b. LIST CODES FROM TABLE 2C-1	
01	Stormwater Only	Depends On Rainfall	None		
03	Stormwater Only	Depends On Rainfall	None		
04	Stormwater Only	Depends On Rainfall	None		
06	Stormwater Only	Depends On Rainfall	None		

OFFICIAL USE ONLY (*effluent guidelines sub-categories*)

CONTINUED FROM THE FRONT

C. Except for storm runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

☐ YES (*complete the following table*) ☑ NO (*go to Section III*)

1. OUTFALL NUMBER (*list*)	2. OPERATION(s) CONTRIBUTING FLOW (*list*)	3. FREQUENCY		4. FLOW				
		a. DAYS PER WEEK (*specify average*)	b. MONTHS PER YEAR (*specify average*)	a. FLOW RATE (*in mgd*)		B. TOTAL VOLUME (*specify with units*)		C. DURATION (*in days*)
				1. LONG TERM AVERAGE	2. MAXIMUM DAILY	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☐ YES (*complete Item III-B*) ☑ NO (*go to Section IV*)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (*or other measure of operation*)?

☐ YES (*complete Item III-C*) ☐ NO (*go to Section IV*)

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION			2. AFFECTED OUTFALLS (*list outfall numbers*)
a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. (*specify*)	

IV. IMPROVEMENTS

A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operations of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

☐ YES (*complete the following table*) ☑ NO (*go to Item IV-B*)

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE	
	a. NO.	b. SOURCE OF DISCHARGE		a. REQUIRED	b. PROJECTED

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (*or other environmental projects which may affect your discharges*) you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction.

☐ MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

CONTINUE ON PAGE 3

EPA I.D. NUMBER (*copy from Item 1 of Form 1*)

CONTINUED FROM PAGE 2

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding – Complete one set of tables for each outfall – Annotate the outfall number in the space provided.
NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered V-1 through V-9.

D. Use the space below to list any of the pollutants listed in Table 2c-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
Formaldehyde May Be Discharged	Possible Component Of Purchased Manufactured Wood Products And As A Reaction Component Of One Of The Fire Retardants 10-14-2010 Samples Outfall 01 0.083 mg/L Outfall 03 0.073 mg/L Outfall 04 0.060 mg/L Outfall 06 0.077 mg/L Test Reporting Limit Of 0.020 mg/L		

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

Is any pollutant listed in Item V-C a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☑ YES (*list all such pollutants below*) ☐ NO (*go to Item VI-B*)

Arsenic
Chromium
Copper

CONTINUED FROM THE FRONT

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☑ YES (*identify the test(s) and describe their purposes below*) ☐ NO (*go to Section VIII*)

From current VPDES permit VA0088714 Section E.1.a.1 -

The acute multi-dilution No Observed Adverse Effect Concentration (NOAEC) tests to use are:

48-Hour Static Acute test using Ceriodaphnia dubia
48-Hour Static Acute test using Pimephales promelas

These acute tests shall be conducted using 5 geometric dilutions of effluent with a minimum of 4 replicates, with 5 organisms in each. The NOAEC as determined by hypothesis testing shall be converted to TUa (Acute Toxicity Units) for reporting where TUa = 100/NOAEC. The LC50 should also be determined and noted on the submitted report. Tests in which control survival is less than 90% are not acceptable.

Three(3) storm events have been tested with 2 outfalls each since the current permit started and five(5) storm events with 2 outfalls each where conducted with alternating test subjects on the previous permit. Since 4-15-2002 a total of twenty-two (22) acute test have been performed with all test results at 100% survival!

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

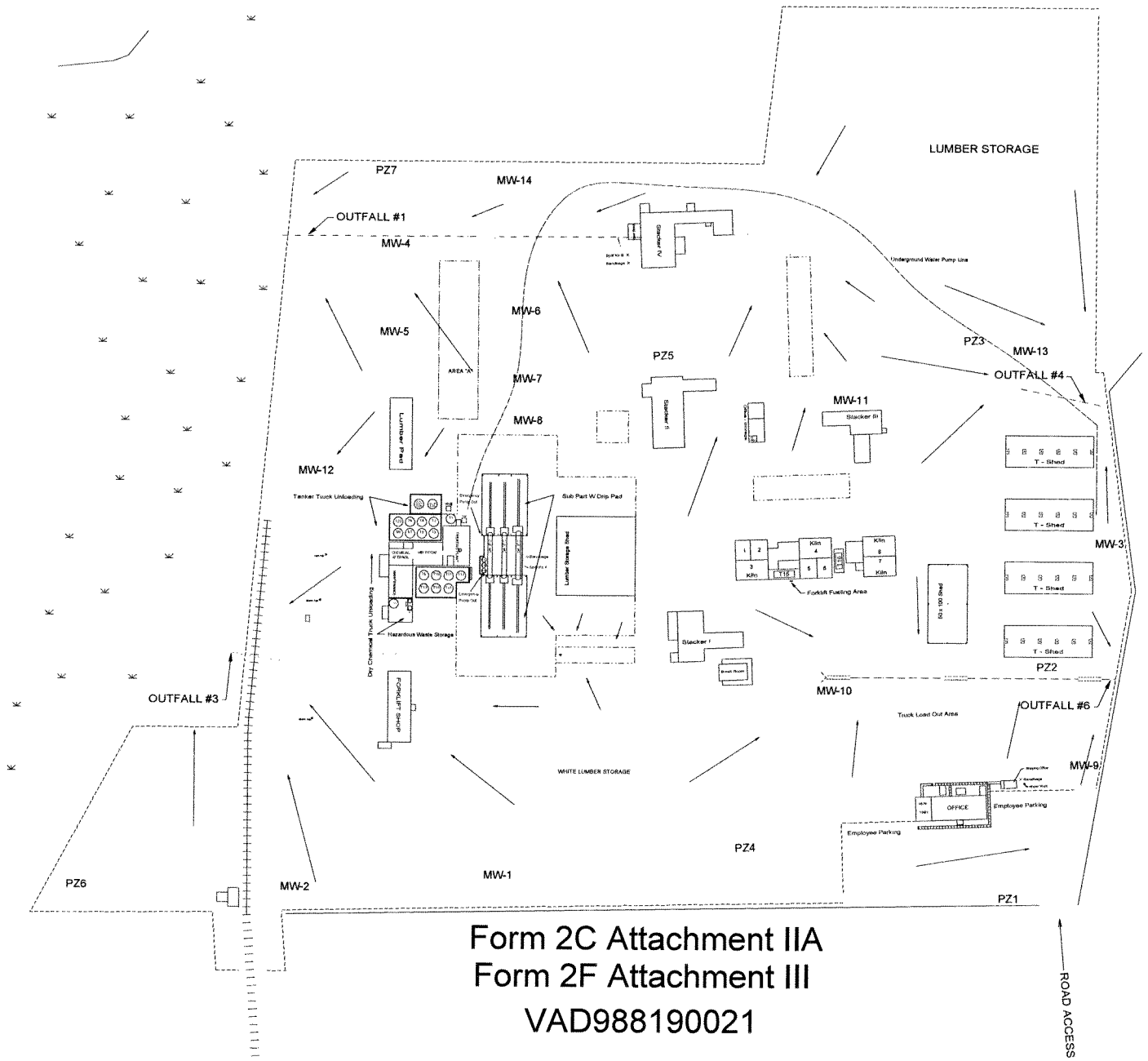
☑ YES (*list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below*) ☐ NO (*go to Section IX*)

A. NAME	B. ADDRESS	C. TELEPHONE (*area code & no.*)	D. POLLUTANTS ANALYZED (*list*)
Southern Petroleum Laboratories, Inc. Houston Lab (SPL) EPA Lab ID = TX00066	8880 Interchange Drive Houston, TX 77054	800-969-6775 / 713-660-0901	BOD, Ammonia (as N), COD, Total Kjeladahl Nitrogen, Total Organic Nitrogen, Total Organic Carbon, TSS, Nitrate-Nitrite, Total Phosphorus (as P), Oil & Grease, Arsenic, Boron, Chromium, Copper, Iron, Lead, Zinc, pH
SPL Lafayette Lab	500 Ambassador Caffery Parkway Scott, LA 70583	337-237-4775	Formaldehyde

IX. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. NAME & OFFICIAL TITLE (*type or print*)	B. PHONE NO. (*area code & no.*)
Randy Edmondson Manager of Engineering Services	(706) 595-7355
C. SIGNATURE	D. DATE SIGNED
	2-24-2011



Form 2C Attachment IIA
Form 2F Attachment III
VAD988190021

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (*use the same format*) instead of completing these pages.
SEE INSTRUCTIONS.

EPA I.D. NUMBER (*copy from Item 1 of Form 1*): VAD988190021

V. INTAKE AND EFFLUENT CHARACTERISTICS *(continued from page 3 of Form 2-C)*

OUTFALL NO.: 01 on 10-14-2010

PART A –You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (*if available*) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (*if available*) (2) MASS	c. LONG TERM AVRG. VALUE (*if available*) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (*if available*) (2) MASS	d. NO. OF ANALYSES	3. UNITS (*specify if blank*) a. CONCEN-TRATION	3. UNITS b. MASS	4. INTAKE (*optional*) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	4. INTAKE a. LONG TERM AVERAGE VALUE (2) MASS	4. INTAKE b. NO. OF ANALYSES
a. Biochemical Oxygen Demand (*BOD*)	6.11						1	mg/L				
b. Chemical Oxygen Demand (*COD*)	48.6				See Summary		1	mg/L				
c. Total Organic Carbon (*TOC*)	12.2						1	mg/L				
d. Total Suspended Solids (*TSS*)	745				See Summary		1	mg/L				
e. Ammonia (*as N*)	1.54				See Summary		1	mg/L				
f. Flow	VALUE 0.0674		VALUE		VALUE		1	MGD		VALUE		
g. Temperature (*winter*)	VALUE 17.6		VALUE		VALUE			°C		VALUE		
h. Temperature (*summer*)	VALUE		VALUE		VALUE			°C		VALUE		
i. pH	MINIMUM 6.12	MAXIMUM 6.12	MINIMUM	MAXIMUM				STANDARD UNITS				

PART B – Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. (*if available*)	2. MARK "X" a. BELIEVED PRESENT	2. MARK "X" b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (*if available*) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (*if available*) (2) MASS	c. LONG TERM AVRG. VALUE (*if available*) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (*if available*) (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCEN-TRATION	4. UNITS b. MASS	5. INTAKE (*optional*) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE b. NO. OF ANALYSES
a. Bromide (24959-67-9)		X												
b. Chlorine, Total Residual		X												
c. Color		X												
d. Fecal Coliform		X												
e. Fluoride (16984-48-8)		X												
f. Nitrate-Nitrite (*as N*)	X		4.36						1	mg/L		See Summary		

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (*if available*)	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. BELIEVED PRESENT	b. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
g. Nitrogen, Total Organic (*as N*)	X		5.67				Summary		1	mg/L				
h. Oil and Grease	X		BRL				Summary		1	mg/L				
i. Phosphorus (as P), Total (7723-14-0)	X		3.02				Summary		1	mg/L				
j. Radioactivity														
(1) Alpha, Total		X												
(2) Beta, Total		X												
(3) Radium, Total		X												
(4) Radium 226, Total		X												
k. Sulfate (*as SO_4*) (14808-79-8)		X												
l. Sulfide (*as S*)		X												
m. Sulfite (*as SO_3*) (14265-45-3)		X												
n. Surfactants		X												
o. Aluminum, Total (7429-90-5)		X												
p. Barium, Total (7440-39-3)		X												
q. Boron, Total (7440-42-8)	X		1.53						1	mg/L				
r. Cobalt, Total (7440-48-4)		X												
s. Iron, Total (7439-89-6)	X		7.68						1	mg/L				
t. Magnesium, Total (7439-95-4)		X												
u. Molybdenum, Total (7439-98-7)		X												
v. Manganese, Total (7439-96-5)		X												
w. Tin, Total (7440-31-5)		X												
x. Titanium, Total (7440-32-6)		X												

CONTINUE ON PAGE V-3

EPA I.D. NUMBER (*copy from Item 1 of Form 1*)	OUTFALL NUMBER
VAD988190021	01 on 10-14-2010

CONTINUED FROM PAGE 3 OF FORM 2-C

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a (*secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions*), mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table (*all 7 pages*) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)			X												
2M. Arsenic, Total (7440-38-2)		X		0.118				Summary		1	mg/L				
3M. Beryllium, Total (7440-41-7)			X												
4M. Cadmium, Total (7440-43-9)			X												
5M. Chromium, Total (7440-47-3)		X		0.066				Summary		1	mg/L				
6M. Copper, Total (7440-50-8)		X		0.116				Summary		1	mg/L				
7M. Lead, Total (7439-92-1)		X		0.015						1	mg/L				
8M. Mercury, Total (7439-97-6)			X												
9M. Nickel, Total (7440-02-0)			X												
10M. Selenium, Total (7782-49-2)			X												
11M. Silver, Total (7440-22-4)			X												
12M. Thallium, Total (7440-28-0)			X												
13M. Zinc, Total (7440-66-6)		X		0.231				Summary		1	mg/L				
14M. Cyanide, Total (57-12-5)			X												
15M. Phenols, Total			X												
DIOXIN															
2,3,7,8-Tetra-chlorodibenzo-P-Dioxin (1764-01-6)			X	DESCRIBE RESULTS											

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Accrolein (107-02-8)			X												
2V. Acrylonitrile (107-13-1)			X												
3V. Benzene (71-43-2)			X												
4V. Bis (*Chloromethyl*) Ether (542-88-1)			X												
5V. Bromoform (75-25-2)			X												
6V. Carbon Tetrachloride (56-23-5)			X												
7V. Chlorobenzene (108-90-7)			X												
8V. Chlorodibromomethane (124-48-1)			X												
9V. Chloroethane (75-00-3)			X												
10V. 2-Chloroethylvinyl Ether (110-75-8)			X												
11V. Chloroform (67-66-3)			X												
12V. Dichlorobromomethane (75-27-4)			X												
13V. Dichlorodifluoromethane (75-71-8)			X												
14V. 1,1-Dichloroethane (75-34-3)			X												
15V. 1,2-Dichloroethane (107-06-2)			X												
16V. 1,1-Dichloroethylene (75-35-4)			X												
17V. 1,2-Dichloropropane (78-87-5)			X												
18V. 1,3-Dichloropropylene (542-75-6)			X												
19V. Ethylbenzene (100-41-4)			X												
20V. Methyl Bromide (74-83-9)			X												
21V. Methyl Chloride (74-87-3)			X												

CONTINUE ON PAGE V-5

CONTINUED FROM PAGE V-4

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS (*continued*)															
22V. Methylene Chloride (75-09-2)			X												
23V. 1,1,2,2-Tetrachloroethane (79-34-5)			X												
24V. Tetrachloroethylene (127-18-4)			X												
25V. Toluene (108-88-3)			X												
26V. 1,2-Trans-Dichloroethylene (156-60-5)			X												
27V. 1,1,1-Trichloroethane (71-55-6)			X												
28V. 1,1,2-Trichloroethane (79-00-5)			X												
29V Trichloroethylene (79-01-6)			X												
30V. Trichlorofluoromethane (75-69-4)			X												
31V. Vinyl Chloride (75-01-4)			X												
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)			X												
2A. 2,4-Dichlorophenol (120-83-2)			X												
3A. 2,4-Dimethylphenol (105-67-9)			X												
4A. 4,6-Dinitro-O-Cresol (534-52-1)			X												
5A. 2,4-Dinitrophenol (51-28-5)			X												
6A. 2-Nitrophenol (88-75-5)			X												
7A. 4-Nitrophenol (100-02-7)			X												
8A. P-Chloro-M-Cresol (59-50-7)			X												
9A. Pentachlorophenol (87-86-5)			X												
10A. Phenol (108-95-2)			X												
11A. 2,4,6-Trichlorophenol (88-05-2)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			X												
2B. Acenaphtylene (208-96-8)			X												
3B. Anthracene (120-12-7)			X												
4B. Benzidine (92-87-5)			X												
5B. Benzo (*a*) Anthracene (56-55-3)			X												
6B. Benzo (*a*) Pyrene (50-32-8)			X												
7B. 3,4-Benzo-fluoranthene (205-99-2)			X												
8B. Benzo (*ghi*) Perylene (191-24-2)			X												
9B. Benzo (*k*) Fluoranthene (207-08-9)			X												
10B. Bis (*2-Chloro-ethoxy*) Methane (111-91-1)			X												
11B. Bis (*2-Chloro-ethyl*) Ether (111-44-4)			X												
12B. Bis (*2-Chloroisopropyl*) Ether (102-80-1)			X												
13B. Bis (*2-Ethyl-hexyl*) Phthalate (117-81-7)			X												
14B. 4-Bromophenyl Phenyl Ether (101-55-3)			X												
15B. Butyl Benzyl Phthalate (85-68-7)			X												
16B. 2-Chloro-naphthalene (91-58-7)			X												
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)			X												
18B. Chrysene (218-01-9)			X												
19B. Dibenzo (*a,h*) Anthracene (53-70-3)			X												
20B. 1,2-Dichloro-benzene (95-50-1)			X												
21B. 1,3-Di-chloro-benzene (541-73-1)			X												

CONTINUE ON PAGE V-7

CONTINUED FROM PAGE V-6

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (*continued*)															
22B. 1,4-Dichlorobenzene (106-46-7)			X												
23B. 3,3-Dichlorobenzidine (91-94-1)			X												
24B. Diethyl Phthalate (84-66-2)			X												
25B. Dimethyl Phthalate (131 -11-3)			X												
26B. Di-N-Butyl Phthalate (84-74-2)			X												
27B. 2,4-Dinitrotoluene (121-14-2)			X												
28B. 2,6-Dinitrotoluene (606-20-2)			X												
29B. Di-N-Octyl Phthalate (117-84-0)			X												
30B. 1,2-Diphenylhydrazine (*as Azobenzene*) (122-66-7)			X												
31B. Fluoranthene (206-44-0)			X												
32B. Fluorene (86-73-7)			X												
33B. Hexachlorobenzene (118-74-1)			X												
34B. Hexachlorobutadiene (87-68-3)			X												
35B. Hexachlorocyclopentadiene (77-47-4)			X												
36B Hexachloroethane (67-72-1)			X												
37B. Indeno (*1,2,3-cd*) Pyrene (193-39-5)			X												
38B. Isophorone (78-59-1)			X												
39B. Naphthalene (91-20-3)			X												
40B. Nitrobenzene (98-95-3)			X												
41B. N-Nitrosodimethylamine (62-75-9)			X												
42B. N-Nitrosodi-N-Propylamine (621-64-7)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (*continued*)															
43B. N-Nitro-sodiphenylamine (86-30-6)			X												
44B. Phenanthrene (85-01-8)			X												
45B. Pyrene (129-00-0)			X												
46B. 1,2,4-Tri-chlorobenzene (120-82-1)			X												
GC/MS FRACTION – PESTICIDES															
1P. Aldrin (309-00-2)			X												
2P. α-BHC (319-84-6)			X												
3P. β-BHC (319-85-7)			X												
4P. γ-BHC (58-89-9)			X												
5P. δ-BHC (319-86-8)			X												
6P. Chlordane (57-74-9)			X												
7P. 4,4'-DDT (50-29-3)			X												
8P. 4,4'-DDE (72-55-9)			X												
9P. 4,4'-DDD (72-54-8)			X												
10P. Dieldrin (60-57-1)			X												
11P. α-Enosulfan (115-29-7)			X												
12P. β-Endosulfan (115-29-7)			X												
13P. Endosulfan Sulfate (1031-07-8)			X												
14P. Endrin (72-20-8)			X												
15P. Endrin Aldehyde (7421-93-4)			X												
16P. Heptachlor (76-44-8)			X												

CONTINUE ON PAGE V-9

EPA I.D. NUMBER (*copy from Item 1 of Form 1*)	OUTFALL NUMBER
VAD988190021	01 on 10-14-2010

CONTINUED FROM PAGE V-8

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – PESTICIDES (*continued*)															
17P. Heptachlor Epoxide (1024-57-3)			X												
18P. PCB-1242 (53469-21-9)			X												
19P. PCB-1254 (11097-69-1)			X												
20P. PCB-1221 (11104-28-2)			X												
21P. PCB-1232 (11141-16-5)			X												
22P. PCB-1248 (12672-29-6)			X												
23P. PCB-1260 (11096-82-5)			X												
24P. PCB-1016 (12674-11-2)			X												
25P. Toxaphene (8001-35-2)			X												

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (*use the same format*) instead of completing these pages.
SEE INSTRUCTIONS.

EPA I.D. NUMBER (*copy from Item 1 of Form 1*): VAD988190021

V. INTAKE AND EFFLUENT CHARACTERISTICS *(continued from page 3 of Form 2-C)*

OUTFALL NO.: 03 on 10-14-2010

PART A –You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (*if available*) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (*if available*) (2) MASS	c. LONG TERM AVRG. VALUE (*if available*) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (*if available*) (2) MASS	d. NO. OF ANALYSES	3. UNITS (*specify if blank*) a. CONCENTRATION	3. UNITS b. MASS	4. INTAKE (*optional*) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	4. INTAKE a. LONG TERM AVERAGE VALUE (2) MASS	4. INTAKE b. NO. OF ANALYSES
a. Biochemical Oxygen Demand (*BOD*)	10.1						1	mg/L				
b. Chemical Oxygen Demand (*COD*)	29.7				See Summary		1	mg/L				
c. Total Organic Carbon (*TOC*)	11.4						1	mg/L				
d. Total Suspended Solids (*TSS*)	928				See Summary		1	mg/L				
e. Ammonia (*as N*)	2.24				See Summary		1	mg/L				
f. Flow	VALUE 0.0726		VALUE		VALUE		1	MGD		VALUE		
g. Temperature (*winter*)	VALUE 18		VALUE		VALUE			°C		VALUE		
h. Temperature (*summer*)	VALUE		VALUE		VALUE			°C		VALUE		
i. pH	MINIMUM 7.22	MAXIMUM 7.22	MINIMUM	MAXIMUM				STANDARD UNITS				

PART B – Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. (*if available*)	2. MARK "X" a. BELIEVED PRESENT	2. MARK "X" b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (*if available*) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (*if available*) (2) MASS	c. LONG TERM AVRG. VALUE (*if available*) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (*if available*) (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (*optional*) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE b. NO. OF ANALYSES
a. Bromide (24959-67-9)		X												
b. Chlorine, Total Residual		X												
c. Color		X												
d. Fecal Coliform		X												
e. Fluoride (16984-48-8)		X												
f. Nitrate-Nitrite (*as N*)	X		1.63						1	mg/L				

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (*if available*)	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. BELIEVED PRESENT	b. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (*if available*) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (*if available*) (2) MASS	c. LONG TERM AVRG. VALUE (*if available*) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (*if available*) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
g. Nitrogen, Total Organic (*as N*)	X		5.11				Summary		1	mg/L				
h. Oil and Grease	X		12.0				Summary		1	mg/L				
i. Phosphorus (as P), Total (7723-14-0)	X		0.881				Summary		1	mg/L				
j. Radioactivity														
(1) Alpha, Total		X												
(2) Beta, Total		X												
(3) Radium, Total		X												
(4) Radium 226, Total		X												
k. Sulfate (*as SO_4*) (14808-79-8)		X												
l. Sulfide (*as S*)		X												
m. Sulfite (*as SO_3*) (14265-45-3)		X												
n. Surfactants		X												
o. Aluminum, Total (7429-90-5)		X												
p. Barium, Total (7440-39-3)		X												
q. Boron, Total (7440-42-8)	X		0.676						1	mg/L				
r. Cobalt, Total (7440-48-4)		X												
s. Iron, Total (7439-89-6)	X		4.55						1	mg/L				
t. Magnesium, Total (7439-95-4)		X												
u. Molybdenum, Total (7439-98-7)		X												
v. Manganese, Total (7439-96-5)		X												
w. Tin, Total (7440-31-5)		X												
x. Titanium, Total (7440-32-6)		X												

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EPA I.D. NUMBER (*copy from Item 1 of Form 1*)	OUTFALL NUMBER
VAD988190021	03 on 10-14-2010

CONTINUED FROM PAGE 3 OF FORM 2-C

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a (*secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions*), mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table (*all 7 pages*) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCEN-TRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)			X												
2M. Arsenic, Total (7440-38-2)		X		0.136				Summary		1	mg/L				
3M. Beryllium, Total (7440-41-7)			X												
4M. Cadmium, Total (7440-43-9)			X												
5M. Chromium, Total (7440-47-3)		X		0.067				Summary		1	mg/L				
6M. Copper, Total (7440-50-8)		X		0.113				Summary		1	mg/L				
7M. Lead, Total (7439-92-1)		X		0.015						1	mg/L				
8M. Mercury, Total (7439-97-6)			X												
9M. Nickel, Total (7440-02-0)			X												
10M. Selenium, Total (7782-49-2)			X												
11M. Silver, Total (7440-22-4)			X												
12M. Thallium, Total (7440-28-0)			X												
13M. Zinc, Total (7440-66-6)		X		0.462				Summary		1	mg/L				
14M. Cyanide, Total (57-12-5)			X												
15M. Phenols, Total			X												
DIOXIN															
2,3,7,8-Tetra-chlorodibenzo-P-Dioxin (1764-01-6)			X	DESCRIBE RESULTS											

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Accrolein (107-02-8)			X												
2V. Acrylonitrile (107-13-1)			X												
3V. Benzene (71-43-2)			X												
4V. Bis (*Chloromethyl*) Ether (542-88-1)			X												
5V. Bromoform (75-25-2)			X												
6V. Carbon Tetrachloride (56-23-5)			X												
7V. Chlorobenzene (108-90-7)			X												
8V. Chlorodibromomethane (124-48-1)			X												
9V. Chloroethane (75-00-3)			X												
10V. 2-Chloroethylvinyl Ether (110-75-8)			X												
11V. Chloroform (67-66-3)			X												
12V. Dichlorobromomethane (75-27-4)			X												
13V. Dichlorodifluoromethane (75-71-8)			X												
14V. 1,1-Dichloroethane (75-34-3)			X												
15V. 1,2-Dichloroethane (107-06-2)			X												
16V. 1,1-Dichloroethylene (75-35-4)			X												
17V. 1,2-Dichloropropane (78-87-5)			X												
18V. 1,3-Dichloropropylene (542-75-6)			X												
19V. Ethylbenzene (100-41-4)			X												
20V. Methyl Bromide (74-83-9)			X												
21V. Methyl Chloride (74-87-3)			X												

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CONTINUED FROM PAGE V-4

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS (*continued*)															
22V. Methylene Chloride (75-09-2)			X												
23V. 1,1,2,2-Tetrachloroethane (79-34-5)			X												
24V. Tetrachloroethylene (127-18-4)			X												
25V. Toluene (108-88-3)			X												
26V. 1,2-Trans-Dichloroethylene (156-60-5)			X												
27V. 1,1,1-Trichloroethane (71-55-6)			X												
28V. 1,1,2-Trichloroethane (79-00-5)			X												
29V Trichloroethylene (79-01-6)			X												
30V. Trichlorofluoromethane (75-69-4)			X												
31V. Vinyl Chloride (75-01-4)			X												
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)			X												
2A. 2,4-Dichlorophenol (120-83-2)			X												
3A. 2,4-Dimethylphenol (105-67-9)			X												
4A. 4,6-Dinitro-O-Cresol (534-52-1)			X												
5A. 2,4-Dinitrophenol (51-28-5)			X												
6A. 2-Nitrophenol (88-75-5)			X												
7A. 4-Nitrophenol (100-02-7)			X												
8A. P-Chloro-M-Cresol (59-50-7)			X												
9A. Pentachlorophenol (87-86-5)			X												
10A. Phenol (108-95-2)			X												
11A. 2,4,6-Trichlorophenol (88-05-2)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			X												
2B. Acenaphtylene (208-96-8)			X												
3B. Anthracene (120-12-7)			X												
4B. Benzidine (92-87-5)			X												
5B. Benzo (*a*) Anthracene (56-55-3)			X												
6B. Benzo (*a*) Pyrene (50-32-8)			X												
7B. 3,4-Benzo-fluoranthene (205-99-2)			X												
8B. Benzo (*ghi*) Perylene (191-24-2)			X												
9B. Benzo (*k*) Fluoranthene (207-08-9)			X												
10B. Bis (*2-Chloro-ethoxy*) Methane (111-91-1)			X												
11B. Bis (*2-Chloro-ethyl*) Ether (111-44-4)			X												
12B. Bis (*2-Chloroisopropyl*) Ether (102-80-1)			X												
13B. Bis (*2-Ethyl-hexyl*) Phthalate (117-81-7)			X												
14B. 4-Bromophenyl Phenyl Ether (101-55-3)			X												
15B. Butyl Benzyl Phthalate (85-68-7)			X												
16B. 2-Chloro-naphthalene (91-58-7)			X												
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)			X												
18B. Chrysene (218-01-9)			X												
19B. Dibenzo (*a,h*) Anthracene (53-70-3)			X												
20B. 1,2-Dichloro-benzene (95-50-1)			X												
21B. 1,3-Di-chloro-benzene (541-73-1)			X												

CONTINUE ON PAGE V-7

CONTINUED FROM PAGE V-6

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (*continued*)															
22B. 1,4-Dichlorobenzene (106-46-7)			X												
23B. 3,3-Dichlorobenzidine (91-94-1)			X												
24B. Diethyl Phthalate (84-66-2)			X												
25B. Dimethyl Phthalate (131 -11-3)			X												
26B. Di-N-Butyl Phthalate (84-74-2)			X												
27B. 2,4-Dinitrotoluene (121-14-2)			X												
28B. 2,6-Dinitrotoluene (606-20-2)			X												
29B. Di-N-Octyl Phthalate (117-84-0)			X												
30B. 1,2-Diphenylhydrazine (*as Azobenzene*) (122-66-7)			X												
31B. Fluoranthene (206-44-0)			X												
32B. Fluorene (86-73-7)			X												
33B. Hexachlorobenzene (118-74-1)			X												
34B. Hexachlorobutadiene (87-68-3)			X												
35B. Hexachlorocyclopentadiene (77-47-4)			X												
36B Hexachloroethane (67-72-1)			X												
37B. Indeno (*1,2,3-cd*) Pyrene (193-39-5)			X												
38B. Isophorone (78-59-1)			X												
39B. Naphthalene (91-20-3)			X												
40B. Nitrobenzene (98-95-3)			X												
41B. N-Nitrosodimethylamine (62-75-9)			X												
42B. N-Nitrosodi-N-Propylamine (621-64-7)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (*continued*)															
43B. N-Nitrosodiphenylamine (86-30-6)			X												
44B. Phenanthrene (85-01-8)			X												
45B. Pyrene (129-00-0)			X												
46B. 1,2,4-Trichlorobenzene (120-82-1)			X												
GC/MS FRACTION – PESTICIDES															
1P. Aldrin (309-00-2)			X												
2P. α-BHC (319-84-6)			X												
3P. β-BHC (319-85-7)			X												
4P. γ-BHC (58-89-9)			X												
5P. δ-BHC (319-86-8)			X												
6P. Chlordane (57-74-9)			X												
7P. 4,4'-DDT (50-29-3)			X												
8P. 4,4'-DDE (72-55-9)			X												
9P. 4,4'-DDD (72-54-8)			X												
10P. Dieldrin (60-57-1)			X												
11P. α-Enosulfan (115-29-7)			X												
12P. β-Endosulfan (115-29-7)			X												
13P. Endosulfan Sulfate (1031-07-8)			X												
14P. Endrin (72-20-8)			X												
15P. Endrin Aldehyde (7421-93-4)			X												
16P. Heptachlor (76-44-8)			X												

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EPA I.D. NUMBER (*copy from Item 1 of Form 1*)	OUTFALL NUMBER
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CONTINUED FROM PAGE V-8

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCEN-TRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – PESTICIDES (*continued*)															
17P. Heptachlor Epoxide (1024-57-3)			X												
18P. PCB-1242 (53469-21-9)			X												
19P. PCB-1254 (11097-69-1)			X												
20P. PCB-1221 (11104-28-2)			X												
21P. PCB-1232 (11141-16-5)			X												
22P. PCB-1248 (12672-29-6)			X												
23P. PCB-1260 (11096-82-5)			X												
24P. PCB-1016 (12674-11-2)			X												
25P. Toxaphene (8001-35-2)			X												

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (*use the same format*) instead of completing these pages.
SEE INSTRUCTIONS.

EPA I.D. NUMBER (*copy from Item 1 of Form 1*): VAD988190021

V. INTAKE AND EFFLUENT CHARACTERISTICS *(continued from page 3 of Form 2-C)*

OUTFALL NO. 04 on 10-14-2010

PART A –You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (*if available*) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (*if available*) (2) MASS	c. LONG TERM AVRG. VALUE (*if available*) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (*if available*) (2) MASS	d. NO. OF ANALYSES	3. UNITS (*specify if blank*) a. CONCEN-TRATION	3. UNITS b. MASS	4. INTAKE (*optional*) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	4. INTAKE a. LONG TERM AVERAGE VALUE (2) MASS	4. INTAKE b. NO. OF ANALYSES
a. Biochemical Oxygen Demand (*BOD*)	3.09						1	mg/L				
b. Chemical Oxygen Demand (*COD*)	16.2				See Summary		1	mg/L				
c. Total Organic Carbon (*TOC*)	5.11						1	mg/L				
d. Total Suspended Solids (*TSS*)	89.2				See Summary		1	mg/L				
e. Ammonia (*as N*)	1.82				See Summary		1	mg/L				
f. Flow	VALUE 0.0459		VALUE		VALUE		1	MGD		VALUE		
g. Temperature (*winter*)	VALUE 17.7		VALUE		VALUE			°C		VALUE		
h. Temperature (*summer*)	VALUE		VALUE		VALUE			°C		VALUE		
i. pH	MINIMUM 6.78	MAXIMUM 6.78	MINIMUM	MAXIMUM				STANDARD UNITS				

PART B – Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. (*if available*)	2. MARK "X" a. BELIEVED PRESENT	2. MARK "X" b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (*if available*) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (*if available*) (2) MASS	c. LONG TERM AVRG. VALUE (*if available*) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (*if available*) (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCEN-TRATION	4. UNITS b. MASS	5. INTAKE (*optional*) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE b. NO. OF ANALYSES
a. Bromide (24959-67-9)		X												
b. Chlorine, Total Residual		X												
c. Color		X												
d. Fecal Coliform		X												
e. Fluoride (16984-48-8)		X												
f. Nitrate-Nitrite (*as N*)	X		1.13						1	mg/L				

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (*if available*)	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. BELIEVED PRESENT	b. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (*if available*) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (*if available*) (2) MASS	c. LONG TERM AVRG. VALUE (*if available*) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (*if available*) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
g. Nitrogen, Total Organic (*as N*)	X		BRL				Summary		1	mg/L				
h. Oil and Grease	X		BRL				Summary		1	mg/L				
i. Phosphorus (as P), Total (7723-14-0)	X		BRL				Summary		1	mg/L				
j. Radioactivity														
(1) Alpha, Total		X												
(2) Beta, Total		X												
(3) Radium, Total		X												
(4) Radium 226, Total		X												
k. Sulfate (*as SO_4*) (14808-79-8)		X												
l. Sulfide (*as S*)		X												
m. Sulfite (*as SO_3*) (14265-45-3)		X												
n. Surfactants		X												
o. Aluminum, Total (7429-90-5)		X												
p. Barium, Total (7440-39-3)		X												
q. Boron, Total (7440-42-8)	X		0.138						1	mg/L				
r. Cobalt, Total (7440-48-4)		X												
s. Iron, Total (7439-89-6)	X		1.85						1	mg/L				
t. Magnesium, Total (7439-95-4)		X												
u. Molybdenum, Total (7439-98-7)		X												
v. Manganese, Total (7439-96-5)		X												
w. Tin, Total (7440-31-5)		X												
x. Titanium, Total (7440-32-6)		X												

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EPA I.D. NUMBER (*copy from Item 1 of Form 1*)	OUTFALL NUMBER
VAD988190021	04 on 10-14-2010

CONTINUED FROM PAGE 3 OF FORM 2-C

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a (*secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions*), mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table (*all 7 pages*) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)			X												
2M. Arsenic, Total (7440-38-2)		X		0.010				Summary		1	mg/L				
3M. Beryllium, Total (7440-41-7)			X												
4M. Cadmium, Total (7440-43-9)			X												
5M. Chromium, Total (7440-47-3)		X		0.009				Summary		1	mg/L				
6M. Copper, Total (7440-50-8)		X		0.015				Summary		1	mg/L				
7M. Lead, Total (7439-92-1)		X		BRL						1	mg/L				
8M. Mercury, Total (7439-97-6)			X												
9M. Nickel, Total (7440-02-0)			X												
10M. Selenium, Total (7782-49-2)			X												
11M. Silver, Total (7440-22-4)			X												
12M. Thallium, Total (7440-28-0)			X												
13M. Zinc, Total (7440-66-6)		X		0.036				Summary		1	mg/L				
14M. Cyanide, Total (57-12-5)			X												
15M. Phenols, Total			X												
DIOXIN															
2,3,7,8-Tetra-chlorodibenzo-P-Dioxin (1764-01-6)			X	DESCRIBE RESULTS											

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Accrolein (107-02-8)			X												
2V. Acrylonitrile (107-13-1)			X												
3V. Benzene (71-43-2)			X												
4V. Bis (*Chloromethyl*) Ether (542-88-1)			X												
5V. Bromoform (75-25-2)			X												
6V. Carbon Tetrachloride (56-23-5)			X												
7V. Chlorobenzene (108-90-7)			X												
8V. Chlorodibromomethane (124-48-1)			X												
9V. Chloroethane (75-00-3)			X												
10V. 2-Chloroethylvinyl Ether (110-75-8)			X												
11V. Chloroform (67-66-3)			X												
12V. Dichlorobromomethane (75-27-4)			X												
13V. Dichlorodifluoromethane (75-71-8)			X												
14V. 1,1-Dichloroethane (75-34-3)			X												
15V. 1,2-Dichloroethane (107-06-2)			X												
16V. 1,1-Dichloroethylene (75-35-4)			X												
17V. 1,2-Dichloropropane (78-87-5)			X												
18V. 1,3-Dichloropropylene (542-75-6)			X												
19V. Ethylbenzene (100-41-4)			X												
20V. Methyl Bromide (74-83-9)			X												
21V. Methyl Chloride (74-87-3)			X												

CONTINUE ON PAGE V-5

CONTINUED FROM PAGE V-4

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS (*continued*)															
22V. Methylene Chloride (75-09-2)			X												
23V. 1,1,2,2-Tetrachloroethane (79-34-5)			X												
24V. Tetrachloroethylene (127-18-4)			X												
25V. Toluene (108-88-3)			X												
26V. 1,2-Trans-Dichloroethylene (156-60-5)			X												
27V. 1,1,1-Trichloroethane (71-55-6)			X												
28V. 1,1,2-Trichloroethane (79-00-5)			X												
29V Trichloroethylene (79-01-6)			X												
30V. Trichlorofluoromethane (75-69-4)			X												
31V. Vinyl Chloride (75-01-4)			X												
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)			X												
2A. 2,4-Dichlorophenol (120-83-2)			X												
3A. 2,4-Dimethylphenol (105-67-9)			X												
4A. 4,6-Dinitro-O-Cresol (534-52-1)			X												
5A. 2,4-Dinitrophenol (51-28-5)			X												
6A. 2-Nitrophenol (88-75-5)			X												
7A. 4-Nitrophenol (100-02-7)			X												
8A. P-Chloro-M-Cresol (59-50-7)			X												
9A. Pentachlorophenol (87-86-5)			X												
10A. Phenol (108-95-2)			X												
11A. 2,4,6-Trichlorophenol (88-05-2)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			X												
2B. Acenaphtylene (208-96-8)			X												
3B. Anthracene (120-12-7)			X												
4B. Benzidine (92-87-5)			X												
5B. Benzo (*a*) Anthracene (56-55-3)			X												
6B. Benzo (*a*) Pyrene (50-32-8)			X												
7B. 3,4-Benzo-fluoranthene (205-99-2)			X												
8B. Benzo (*ghi*) Perylene (191-24-2)			X												
9B. Benzo (*k*) Fluoranthene (207-08-9)			X												
10B. Bis (*2-Chloro-ethoxy*) Methane (111-91-1)			X												
11B. Bis (*2-Chloro-ethyl*) Ether (111-44-4)			X												
12B. Bis (*2-Chloroisopropyl*) Ether (102-80-1)			X												
13B. Bis (*2-Ethyl-hexyl*) Phthalate (117-81-7)			X												
14B. 4-Bromophenyl Phenyl Ether (101-55-3)			X												
15B. Butyl Benzyl Phthalate (85-68-7)			X												
16B. 2-Chloro-naphthalene (91-58-7)			X												
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)			X												
18B. Chrysene (218-01-9)			X												
19B. Dibenzo (*a,h*) Anthracene (53-70-3)			X												
20B. 1,2-Dichloro-benzene (95-50-1)			X												
21B. 1,3-Di-chloro-benzene (541-73-1)			X												

CONTINUE ON PAGE V-7

CONTINUED FROM PAGE V-6

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (*continued*)															
22B. 1,4-Dichlorobenzene (106-46-7)			X												
23B. 3,3-Dichlorobenzidine (91-94-1)			X												
24B. Diethyl Phthalate (84-66-2)			X												
25B. Dimethyl Phthalate (131 -11-3)			X												
26B. Di-N-Butyl Phthalate (84-74-2)			X												
27B. 2,4-Dinitrotoluene (121-14-2)			X												
28B. 2,6-Dinitrotoluene (606-20-2)			X												
29B. Di-N-Octyl Phthalate (117-84-0)			X												
30B. 1,2-Diphenylhydrazine (*as Azobenzene*) (122-66-7)			X												
31B. Fluoranthene (206-44-0)			X												
32B. Fluorene (86-73-7)			X												
33B. Hexachlorobenzene (118-74-1)			X												
34B. Hexachlorobutadiene (87-68-3)			X												
35B. Hexachlorocyclopentadiene (77-47-4)			X												
36B Hexachloroethane (67-72-1)			X												
37B. Indeno (*1,2,3-cd*) Pyrene (193-39-5)			X												
38B. Isophorone (78-59-1)			X												
39B. Naphthalene (91-20-3)			X												
40B. Nitrobenzene (98-95-3)			X												
41B. N-Nitrosodimethylamine (62-75-9)			X												
42B. N-Nitrosodi-N-Propylamine (621-64-7)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (*continued*)															
43B. N-Nitro-sodiphenylamine (86-30-6)			X												
44B. Phenanthrene (85-01-8)			X												
45B. Pyrene (129-00-0)			X												
46B. 1,2,4-Tri-chlorobenzene (120-82-1)			X												
GC/MS FRACTION – PESTICIDES															
1P. Aldrin (309-00-2)			X												
2P. α-BHC (319-84-6)			X												
3P. β-BHC (319-85-7)			X												
4P. γ-BHC (58-89-9)			X												
5P. δ-BHC (319-86-8)			X												
6P. Chlordane (57-74-9)			X												
7P. 4,4'-DDT (50-29-3)			X												
8P. 4,4'-DDE (72-55-9)			X												
9P. 4,4'-DDD (72-54-8)			X												
10P. Dieldrin (60-57-1)			X												
11P. α-Enosulfan (115-29-7)			X												
12P. β-Endosulfan (115-29-7)			X												
13P. Endosulfan Sulfate (1031-07-8)			X												
14P. Endrin (72-20-8)			X												
15P. Endrin Aldehyde (7421-93-4)			X												
16P. Heptachlor (76-44-8)			X												

CONTINUE ON PAGE V-9

EPA I.D. NUMBER (*copy from Item 1 of Form 1*)	OUTFALL NUMBER
VAD988190021	04 on 10-14-2010

CONTINUED FROM PAGE V-8

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCEN-TRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – PESTICIDES (*continued*)															
17P. Heptachlor Epoxide (1024-57-3)			X												
18P. PCB-1242 (53469-21-9)			X												
19P. PCB-1254 (11097-69-1)			X												
20P. PCB-1221 (11104-28-2)			X												
21P. PCB-1232 (11141-16-5)			X												
22P. PCB-1248 (12672-29-6)			X												
23P. PCB-1260 (11096-82-5)			X												
24P. PCB-1016 (12674-11-2)			X												
25P. Toxaphene (8001-35-2)			X												

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (*use the same format*) instead of completing these pages.
SEE INSTRUCTIONS.

EPA I.D. NUMBER (*copy from Item 1 of Form 1*)
VAD988190021

V. INTAKE AND EFFLUENT CHARACTERISTICS *(continued from page 3 of Form 2-C)*

OUTFALL NO.
06 on 10-14-2010

PART A –You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (*if available*) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (*if available*) (2) MASS	c. LONG TERM AVRG. VALUE (*if available*) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (*if available*) (2) MASS	d. NO. OF ANALYSES	3. UNITS (*specify if blank*) a. CONCEN-TRATION	3. UNITS b. MASS	4. INTAKE (*optional*) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	4. INTAKE a. LONG TERM AVERAGE VALUE (2) MASS	4. INTAKE b. NO. OF ANALYSES
a. Biochemical Oxygen Demand (*BOD*)	9.4						1	mg/L				
b. Chemical Oxygen Demand (*COD*)	35.1				See Summary		1	mg/L				
c. Total Organic Carbon (*TOC*)	3.17						1	mg/L				
d. Total Suspended Solids (*TSS*)	776				See Summary		1	mg/L				
e. Ammonia (*as N*)	3.64				See Summary		1	mg/L				
f. Flow	VALUE 0.0637		VALUE		VALUE		1	MGD		VALUE		
g. Temperature (*winter*)	VALUE 18.4		VALUE		VALUE			°C		VALUE		
h. Temperature (*summer*)	VALUE		VALUE		VALUE			°C		VALUE		
i. pH	MINIMUM 6.22	MAXIMUM 6.22	MINIMUM	MAXIMUM				STANDARD UNITS				

PART B – Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. (*if available*)	2. MARK "X" a. BELIEVED PRESENT	2. MARK "X" b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (*if available*) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (*if available*) (2) MASS	c. LONG TERM AVRG. VALUE (*if available*) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (*if available*) (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCEN-TRATION	4. UNITS b. MASS	5. INTAKE (*optional*) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE b. NO. OF ANALYSES
a. Bromide (24959-67-9)		X												
b. Chlorine, Total Residual		X												
c. Color		X												
d. Fecal Coliform		X												
e. Fluoride (16984-48-8)		X												
f. Nitrate-Nitrite (*as N*)	X		3.47						1	mg/L				

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (*if available*)	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. BELIEVED PRESENT	b. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (*if available*) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (*if available*) (2) MASS	c. LONG TERM AVRG. VALUE (*if available*) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (*if available*) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
g. Nitrogen, Total Organic (*as N*)	X		BRL				Summary		1	mg/L				
h. Oil and Grease	X		BRL				Summary		1	mg/L				
i. Phosphorus (as P), Total (7723-14-0)	X		2.84				Summary		1	mg/L				
j. Radioactivity														
(1) Alpha, Total		X												
(2) Beta, Total		X												
(3) Radium, Total		X												
(4) Radium 226, Total		X												
k. Sulfate (*as SO_4*) (14808-79-8)		X												
l. Sulfide (*as S*)		X												
m. Sulfite (*as SO_3*) (14265-45-3)		X												
n. Surfactants		X												
o. Aluminum, Total (7429-90-5)		X												
p. Barium, Total (7440-39-3)		X												
q. Boron, Total (7440-42-8)	X		1.23						1	mg/L				
r. Cobalt, Total (7440-48-4)		X												
s. Iron, Total (7439-89-6)	X		25.5						1	mg/L				
t. Magnesium, Total (7439-95-4)		X												
u. Molybdenum, Total (7439-98-7)		X												
v. Manganese, Total (7439-96-5)		X												
w. Tin, Total (7440-31-5)		X												
x. Titanium, Total (7440-32-6)		X												

CONTINUE ON PAGE V-3

EPA I.D. NUMBER (*copy from Item 1 of Form 1*)	OUTFALL NUMBER
VAD988190021	06 on 10-14-2010

CONTINUED FROM PAGE 3 OF FORM 2-C

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a (*secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions*), mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table (*all 7 pages*) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)			X												
2M. Arsenic, Total (7440-38-2)		X		0.078				Summary		1	mg/L				
3M. Beryllium, Total (7440-41-7)			X												
4M. Cadmium, Total (7440-43-9)			X												
5M. Chromium, Total (7440-47-3)		X		0.105				Summary		1	mg/L				
6M. Copper, Total (7440-50-8)		X		0.109				Summary		1	mg/L				
7M. Lead, Total (7439-92-1)		X		0.032						1	mg/L				
8M. Mercury, Total (7439-97-6)			X												
9M. Nickel, Total (7440-02-0)			X												
10M. Selenium, Total (7782-49-2)			X												
11M. Silver, Total (7440-22-4)			X												
12M. Thallium, Total (7440-28-0)			X												
13M. Zinc, Total (7440-66-6)		X		0.218				Summary		1	mg/L				
14M. Cyanide, Total (57-12-5)			X												
15M. Phenols, Total			X												
DIOXIN															
2,3,7,8-Tetra-chlorodibenzo-P-Dioxin (1764-01-6)			X	DESCRIBE RESULTS											

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Accrolein (107-02-8)			X												
2V. Acrylonitrile (107-13-1)			X												
3V. Benzene (71-43-2)			X												
4V. Bis (*Chloromethyl*) Ether (542-88-1)			X												
5V. Bromoform (75-25-2)			X												
6V. Carbon Tetrachloride (56-23-5)			X												
7V. Chlorobenzene (108-90-7)			X												
8V. Chlorodibromomethane (124-48-1)			X												
9V. Chloroethane (75-00-3)			X												
10V. 2-Chloroethylvinyl Ether (110-75-8)			X												
11V. Chloroform (67-66-3)			X												
12V. Dichlorobromomethane (75-27-4)			X												
13V. Dichlorodifluoromethane (75-71-8)			X												
14V. 1,1-Dichloroethane (75-34-3)			X												
15V. 1,2-Dichloroethane (107-06-2)			X												
16V. 1,1-Dichloroethylene (75-35-4)			X												
17V. 1,2-Dichloropropane (78-87-5)			X												
18V. 1,3-Dichloropropylene (542-75-6)			X												
19V. Ethylbenzene (100-41-4)			X												
20V. Methyl Bromide (74-83-9)			X												
21V. Methyl Chloride (74-87-3)			X												

CONTINUE ON PAGE V-5

CONTINUED FROM PAGE V-4

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCEN-TRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS (*continued*)															
22V. Methylene Chloride (75-09-2)			X												
23V. 1,1,2,2-Tetrachloroethane (79-34-5)			X												
24V. Tetrachloro-ethylene (127-18-4)			X												
25V. Toluene (108-88-3)			X												
26V. 1,2-Trans-Dichloroethylene (156-60-5)			X												
27V. 1,1,1-Trichloro-ethane (71-55-6)			X												
28V. 1,1,2-Trichloro-ethane (79-00-5)			X												
29V Trichloro-ethylene (79-01-6)			X												
30V. Trichloro-fluoromethane (75-69-4)			X												
31V. Vinyl Chloride (75-01-4)			X												
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)			X												
2A. 2,4-Dichloro-phenol (120-83-2)			X												
3A. 2,4-Dimethyl-phenol (105-67-9)			X												
4A. 4,6-Dinitro-O-Cresol (534-52-1)			X												
5A. 2,4-Dinitro-phenol (51-28-5)			X												
6A. 2-Nitrophenol (88-75-5)			X												
7A. 4-Nitrophenol (100-02-7)			X												
8A. P-Chloro-M-Cresol (59-50-7)			X												
9A. Pentachloro-phenol (87-86-5)			X												
10A. Phenol (108-95-2)			X												
11A. 2,4,6-Trichloro-phenol (88-05-2)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			X												
2B. Acenaphtylene (208-96-8)			X												
3B. Anthracene (120-12-7)			X												
4B. Benzidine (92-87-5)			X												
5B. Benzo (*a*) Anthracene (56-55-3)			X												
6B. Benzo (*a*) Pyrene (50-32-8)			X												
7B. 3,4-Benzo-fluoranthene (205-99-2)			X												
8B. Benzo (*ghi*) Perylene (191-24-2)			X												
9B. Benzo (*k*) Fluoranthene (207-08-9)			X												
10B. Bis (*2-Chloro-ethoxy*) Methane (111-91-1)			X												
11B. Bis (*2-Chloro-ethyl*) Ether (111-44-4)			X												
12B. Bis (*2-Chloroisopropyl*) Ether (102-80-1)			X												
13B. Bis (*2-Ethyl-hexyl*) Phthalate (117-81-7)			X												
14B. 4-Bromophenyl Phenyl Ether (101-55-3)			X												
15B. Butyl Benzyl Phthalate (85-68-7)			X												
16B. 2-Chloro-naphthalene (91-58-7)			X												
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)			X												
18B. Chrysene (218-01-9)			X												
19B. Dibenzo (*a,h*) Anthracene (53-70-3)			X												
20B. 1,2-Dichloro-benzene (95-50-1)			X												
21B. 1,3-Di-chloro-benzene (541-73-1)			X												

CONTINUED FROM PAGE V-6

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (*continued*)															
22B. 1,4-Dichlorobenzene (106-46-7)			X												
23B. 3,3-Dichlorobenzidine (91-94-1)			X												
24B. Diethyl Phthalate (84-66-2)			X												
25B. Dimethyl Phthalate (131 -11-3)			X												
26B. Di-N-Butyl Phthalate (84-74-2)			X												
27B. 2,4-Dinitrotoluene (121-14-2)			X												
28B. 2,6-Dinitrotoluene (606-20-2)			X												
29B. Di-N-Octyl Phthalate (117-84-0)			X												
30B. 1,2-Diphenylhydrazine (*as Azobenzene*) (122-66-7)			X												
31B. Fluoranthene (206-44-0)			X												
32B. Fluorene (86-73-7)			X												
33B. Hexachlorobenzene (118-74-1)			X												
34B. Hexachlorobutadiene (87-68-3)			X												
35B. Hexachlorocyclopentadiene (77-47-4)			X												
36B Hexachloroethane (67-72-1)			X												
37B. Indeno (*1,2,3-cd*) Pyrene (193-39-5)			X												
38B. Isophorone (78-59-1)			X												
39B. Naphthalene (91-20-3)			X												
40B. Nitrobenzene (98-95-3)			X												
41B. N-Nitrosodimethylamine (62-75-9)			X												
42B. N-Nitrosodi-N-Propylamine (621-64-7)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (*continued*)															
43B. N-Nitrosodiphenylamine (86-30-6)			X												
44B. Phenanthrene (85-01-8)			X												
45B. Pyrene (129-00-0)			X												
46B. 1,2,4-Trichlorobenzene (120-82-1)			X												
GC/MS FRACTION – PESTICIDES															
1P. Aldrin (309-00-2)			X												
2P. α-BHC (319-84-6)			X												
3P. β-BHC (319-85-7)			X												
4P. γ-BHC (58-89-9)			X												
5P. δ-BHC (319-86-8)			X												
6P. Chlordane (57-74-9)			X												
7P. 4,4'-DDT (50-29-3)			X												
8P. 4,4'-DDE (72-55-9)			X												
9P. 4,4'-DDD (72-54-8)			X												
10P. Dieldrin (60-57-1)			X												
11P. α-Enosulfan (115-29-7)			X												
12P. β-Endosulfan (115-29-7)			X												
13P. Endosulfan Sulfate (1031-07-8)			X												
14P. Endrin (72-20-8)			X												
15P. Endrin Aldehyde (7421-93-4)			X												
16P. Heptachlor (76-44-8)			X												

EPA I.D. NUMBER (*copy from Item 1 of Form 1*)	OUTFALL NUMBER
VAD988190021	06 on 10-14-2010

CONTINUED FROM PAGE V-8

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (*if available*)		c. LONG TERM AVRG. VALUE (*if available*)		d. NO. OF ANALYSES	a. CONCEN-TRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – PESTICIDES (*continued*)															
17P. Heptachlor Epoxide (1024-57-3)			X												
18P. PCB-1242 (53469-21-9)			X												
19P. PCB-1254 (11097-69-1)			X												
20P. PCB-1221 (11104-28-2)			X												
21P. PCB-1232 (11141-16-5)			X												
22P. PCB-1248 (12672-29-6)			X												
23P. PCB-1260 (11096-82-5)			X												
24P. PCB-1016 (12674-11-2)			X												
25P. Toxaphene (8001-35-2)			X												

HOOVER TREATED WOOD PRODUCTS, INC.

MILFORD, VA Facility Chemistry Test Data Summary

VPDES Number VA0088714

OUTFALL 01 RESULTS

TEST	UNITS	11/16/2006	5/3/2007	3/5/2008	11/25/2008	4/15/2009	10/28/2009	6/30/2010	10/14/2010
LAB		SPL	SPL	SPL	SPL	SPL	SPL	SPL	SPL
001 FLOW (From Total Property)	MGD	*0.761*	*0.339*	*0.347*	*0.0308*	*0.0834*	*0.1042*	*0.0562*	*0.2496*
002 pH	SU	7.09	6.54	7.42	6.72	6.45	7.34	6.37	6.12
004 Total Suspended Solids (TSS)	mg/L	334	54	19.6	32.4	16.8	12	38.4	745
008 Chemical Oxygen Demand (COD)	mg/L	12.8	27	16	38.1	34.6	37.5	45	48.6
012 Phosphorus, Total (As P)	mg/L	1.68	1.34	1.04	0.425	1.79	2.17	0.225	3.02
013 Nitrogen, Total (As N)	mg/L	3.6	2.8	BDL	5.6	4.7	17	2.2	5.67
039 Ammonia, (As N)	mg/L	3.08	1.82	BDL	BDL	BDL	3.08	BDL	1.54
137 Hardness, Total (As CACO3)	mg/L	24	96	340	220	54	52	80	104
203 Copper, Total Recoverable	ug/L	77.8	20.6	6.37	19.4	34.2	27.3	BDL	116
211 Chromium, Total Recoverable	ug/L	68.8	9.97	BDL	7.53	8.14	7.32	BDL	65.5
212 Arsenic, Total Recoverable	ug/L	39.2	18.3	9.07	54.4	91.3	87.5	5.09	118
500 Oil & Grease	mg/L	BDL	BDL	BDL	BDL	5.1	BDL	BDL	BDL

Note:

BDL = Below Detectable Limit
MGD = Million Gallons Per Day
-------- = No Test Performed

HOOVER TREATED WOOD PRODUCTS, INC.

MILFORD, VA Facility Chemistry Test Data Summary

VPDES Number VA0088714

OUTFALL 03 RESULTS

TEST	UNITS	11/16/2006	5/3/2007	3/5/2008	11/25/2008	4/15/2009	10/28/2009	6/30/2010	10/14/2010
LAB		SPL	SPL	SPL	SPL	SPL	SPL	SPL	SPL
001 FLOW (From Total Property)	MGD	*0.761*	*0.339*	*0.347*	*0.0308*	*0.0834*	*0.1042*	*0.0562*	*0.2496*
002 pH	SU	7.22	6.5	6.92	7.01	6.39	7.48	5.79	7.22
004 Total Suspended Solids (TSS)	mg/L	358	114	9.6	148	20.8	5.2	718	928
008 Chemical Oxygen Demand (COD)	mg/L	BDL	24	31	38.1	48	-------	72.5	29.7
012 Phosphorus, Total (As P)	mg/L	1.68	1.42	1.47	1.24	0.153	-------	3.83	0.881
013 Nitrogen, Total (As N)	mg/L	4.4	3	5.4	3.9	2.2	-------	6.2	5.11
039 Ammonia, (As N)	mg/L	BDL	2.52	2.1	BDL	BDL	-------	4.2	2.24
137 Hardness, Total (As CACO3)	mg/L	22	100	260	210	32	74	96	92
196 Zinc, Total Recoverable	ug/L	200	36.5	1010	2050	14.3	339	60	462
203 Copper, Total Recoverable	ug/L	95.4	17.9	25.9	50	BDL	22.5	53.8	113
211 Chromium, Total Recoverable	ug/L	104	10.7	BDL	BDL	BDL	8.04	80.3	66.6
212 Arsenic, Total Recoverable	ug/L	50.3	73.1	97.2	84.2	BDL	106	288	136
500 Oil & Grease	mg/L	BDL	BDL	BDL	BDL	BDL	BDL	BDL	12

Note:

BDL = Below Detectable Limit
MGD = Million Gallons Per Day
------- = No Test Performed

HOOVER TREATED WOOD PRODUCTS, INC.

MILFORD, VA Facility Chemistry Test Data Summary

VPDES Number VA0088714

OUTFALL 04 RESULTS

TEST	UNITS	11/16/2006	5/3/2007	3/5/2008	11/25/2008	4/15/2009	10/28/2009	6/30/2010	10/14/2010
LAB		SPL	SPL	SPL	SPL	SPL	SPL	SPL	SPL
001 FLOW (From Total Property)	MGD	*0.761*	*0.339*	*0.347*	*0.0308*	*0.0834*	*0.1042*	*0.0562*	*0.2496*
002 pH	SU	6.61	6.52	7.04	6.71	6.49	7.56	6.36	6.78
004 Total Suspended Solids (TSS)	mg/L	282	18.8	12.4	236	16.8	27.6	482	89.2
008 Chemical Oxygen Demand (COD)	mg/L	51.3	34	39	167	37	40	102	16.2
012 Phosphorus, Total (As P)	mg/L	1.63	0.468	0.933	2.25	0.097	0.689	2.68	BDL
013 Nitrogen, Total (As N)	mg/L	6.3	1.3	2.9	5.6	1.4	2.1	42	BDL
039 Ammonia, (As N)	mg/L	1.12	1.4	1.4	1.4	BRL	2.52	35.8	1.82
137 Hardness, Total (As CACO3)	mg/L	24	44	40	96	48	38	128	48
203 Copper, Total Recoverable	**ug/L**	71.3	BDL	17.2	12.7	BDL	27.4	28.1	15.1
211 Chromium, Total Recoverable	**ug/L**	58.7	BDL	6.09	9.63	BDL	5.88	45.1	9.1
212 Arsenic, Total Recoverable	**ug/L**	40.2	BDL	14.9	58.2	BDL	15.7	458	10.3
500 Oil & Grease	mg/L	BDL	BDL	BDL	BDL	BDL	BDL	BDL	BDL

Note:

BDL = Below Detectable Limit
MGD = Million Gallons Per Day
------- = No Test Performed

HOOVER TREATED WOOD PRODUCTS, INC.

MILFORD, VA Facility Chemistry Test Data Summary

VPDES Number VA0088714

OUTFALL 06 RESULTS

TEST	UNITS	11/16/2006	5/3/2007	3/5/2008	11/25/2008	4/15/2009	10/28/2009	6/30/2010	10/14/2010
LAB		SPL	SPL	SPL	SPL	SPL	SPL	SPL	SPL
001 FLOW (From Total Property)	MGD	*0.761*	*0.339*	*0.347*	*0.0308*	*0.0834*	*0.1042*	*0.0562*	*0.2496*
002 pH	SU	6.85	6.52	7.03	6.93	6.34	7.31	6.34	6.22
004 Total Suspended Solids (TSS)	mg/L	40.8	82	284	18	116	122	15.6	776
008 Chemical Oxygen Demand (COD)	mg/L	15.4	34	60	33.3	54.3	22.5	140	35.1
012 Phosphorus, Total (As P)	mg/L	1.01	2.44	1.39	1.95	1.69	1.55	1.01	2.84
013 Nitrogen, Total (As N)	mg/L	2.4	3.7	3.4	7.4	8.3	5.5	2.6	BDL
039 Ammonia, (As N)	mg/L	1.54	2.66	1.82	3.36	BDL	2.38	BDL	3.64
137 Hardness, Total (As CACO3)	mg/L	22	62	44	80	46	44	100	76
196 Zinc, Total Recoverable	ug/L	26.7	28.7	41.7	62.8	53.6	75.7	19.8	218
203 Copper, Total Recoverable	ug/L	24.2	13.9	22.8	7.03	49.2	56.5	BDL	109
211 Chromium, Total Recoverable	ug/L	14.4	8.31	11.9	BDL	20.9	27.1	10.9	105
212 Arsenic, Total Recoverable	ug/L	41.5	60.4	30.6	BDL	136	58.8	10.8	78.4
500 Oil & Grease	mg/L	BDL	BDL	BDL	BDL	BDL	BDL	BDL	BDL

Note:

BDL = Below Detectable Limit
MGD = Million Gallons Per Day
------- = No Test Performed

HOOVER TREATED WOOD PRODUCTS, Inc.
MILFORD, VA Facility Toxicity Test Data Summary
VPDES Number VA0088714
Outfall 3

Sample Collection Date	Species-Method	48-h LC50	T.U. ac	Conc. @ 100%	Rainfall (Inches)	Previous Storm Event Rainfall (Inches)	Previous Storm Event Date
	Promelas EPA 2000.0	>100	<1.00	Survival % = 100			
9/30/2010	C. dubia EPA 2002.0	>100	<1.00	Survival % = 100	6.5	0.20	9/19/2010
	Promelas EPA 2000.0	>100	<1.00	Survival % = 100			
4/15/2009	C. dubia EPA 2002.0	>100	<1.00	Survival % = 100	0.75	0.50	4/10/2009
	Promelas EPA 2000.0	>100	<1.00	Survival % = 100			
6/3/2007	C. dubia EPA 2002.0	>100	<1.00	Survival % = 100	0.75	0.75	5/16/2007
12/29/2005	Promelas EPA 2000.0	>100	<1.00	Survival % = 100	0.3	1.40	12/26/2005
2/14/2005	C. dubia EPA 2002.0	>100	<1.00	Survival % = 100	3.53	0.67	2/6/2005
3/30/2004	Promelas EPA 2000.0	>100	<1.00	Survival % = 100	1.4	0.32	2/25/2004
10/16/2002	C. dubia EPA 2002.0	>100	<1.00	Survival % = 100	2.1	0.51	10/11/2002
4/15/2002	Promelas EPA 2000.0	>100	<1.00	Survival % = 100	0.4	0.17	3/13/2002

HOOVER TREATED WOOD PRODUCTS, Inc.
MILFORD, VA Facility Toxicity Test Data Summary
VPDES Number VA0088714
Outfall 6

Sample Collection Date	Species-Method	48-h LC50	T.U. ac	Conc. @ 100%	Rainfall (Inches)	Previous Storm Event Rainfall (Inches)	Previous Storm Event Date
	Promelas EPA 2000.0	>100	<1.00	Survival % = 100			
9/30/2010	C. dubia EPA 2002.0	>100	<1.00	Survival % = 100	6.5	0.20	9/19/2010
	Promelas EPA 2000.0	>100	<1.00	Survival % = 100			
4/15/2009	C. dubia EPA 2002.0	>100	<1.00	Survival % = 100	0.75	0.50	4/10/2009
	Promelas EPA 2000.0	>100	<1.00	Survival % = 100			
6/3/2007	C. dubia EPA 2002.0	>100	<1.00	Survival % = 100	0.75	0.75	5/16/2007
12/29/2005	Promelas EPA 2000.0	>100	<1.00	Survival % = 100	0.3	1.40	12/26/2005
2/14/2005	C. dubia EPA 2002.0	>100	<1.00	Survival % = 100	3.53	0.67	2/6/2005
3/30/2004	Promelas EPA 2000.0	>100	<1.00	Survival % = 100	1.4	0.32	2/25/2004
10/16/2002	C. dubia EPA 2002.0	>100	<1.00	Survival % = 100	2.1	0.51	10/11/2002
4/15/2002	Promelas EPA 2000.0	>100	<1.00	Survival % = 100	0.4	0.17	3/13/2002

HOOVER TREATED WOOD PRODUCTS
VPDES VA0088714
QUARTERLY GROUNDWATER SAMPLING SUMMARY
MW-1

Date Well Sampled	Report Number	Static Water Level FT	pH S.U.	Ammonia (as N) mg/L	Organic Carbon, Total mg/L	Total Dissolved Solids (Residue, filterable) mg/L	Conductivity mS/m
9/14,15/2010	54	11.45	6.41	ND	ND	107	0.144
6/22/2010	53	10.15	5.83	ND	ND	89	0.131
3/9/2010	52	8.84	6.72	0.090	ND	101	0.166
12/9/2009	51	9.46	6.60	ND	ND	245	0.188
9/9,10/2009	50	10.98	6.35	ND	ND	ND	0.203
6/9/2009	49	10.00	6.90	0.137	ND	133	0.220
3/12/2009	48	10.63	6.36	0.113	1.04	164	0.204
12/11/2008	47	11.30	6.38	ND	1.29	188	0.211
9/17/2008	46	11.09	6.10	0.162	1.37	193	0.252
6/11/2008	45	9.62	7.88	0.330	1.47	130	0.144
3/12/2008	44	10.78	6.90	0.345	1.02	141	0.237
12/6/2007	43	11.20	7.76	0.311	ND	142	0.241
9/12/2007	42	11.30	6.03	0.237	ND	129	0.231
6/13/2007	41	10.09	6.14	0.393	1.30	356	0.228
3/15/2007	40	9.68	8.36	ND	ND	190	0.253
12/12/2006	39	9.33	7.60	ND	ND	148	0.230
9/11,12/2006	38	10.30	8.06	0.638	1.29	155	0.243

HOOVER TREATED WOOD PRODUCTS
VPDES VA0088714
QUARTERLY GROUNDWATER SAMPLING SUMMARY
MW-3

Date Well Sampled	Report Number	Static Water Level FT	pH S.U.	Ammonia (as N) mg/L	Organic Carbon, Total mg/L	Total Dissolved Solids (Residue, filterable) mg/L	Conductivity mS/m
9/14,16/2010	54	8.43	7.05	62.400	4.91	458	0.842
6/22,24/2010	53	6.20	6.97	143.000	12.80	919	1.960
3/9,10/2010	52	6.35	7.02	146.000	13.30	765	2.251
12/9,10/2009	51	6.51	6.76	10.500	4.57	513	0.993
9/9,10/2009	50	7.77	7.00	66.300	5.55	416	1.153
6/9/2009	49	7.02	7.16	87.300	8.01	571	1.452
3/11/2009	48	7.62	6.91	115.000	4.02	414	0.825
12/11/2008	47	7.86	6.71	62.200	4.25	439	0.613
9/17/2008	46	7.91	7.07	44.700	5.12	459	1.066
6/11/2008	45	6.83	6.86	159.000	10.30	597	0.895
3/12/2008	44	7.34	6.83	54.900	3.88	449	0.914
12/6/2007	43	8.18	8.19	80.700	4.30	418	0.969
9/12/2007	42	8.38	6.99	0.232	5.78	540	1.470
6/13/2007	41	7.04	7.20	325.000	16.30	1090	3.035
3/15/2007	40	6.82	6.77	131.000	19.70	1110	2.289
12/12/2006	39	6.43	7.13	151.000	13.50	1110	2.476
9/11,12/2006	38	7.83	7.20	198.000	13.60	946	2.186

HOOVER TREATED WOOD PRODUCTS
VPDES VA0088714
QUARTERLY GROUNDWATER SAMPLING SUMMARY
MW-4

Date Well Sampled	Report Number	Static Water Level FT	pH S.U.	Ammonia (as N) mg/L	Organic Carbon, Total mg/L	Total Dissolved Solids (Residue, filterable) mg/L	Conductivity mS/m
9/14,15/2010	54	9.52	5.38	ND	1.36	150	0.153
6/22/2010	53	7.98	4.92	ND	ND	96	0.124
3/9,10/2010	52	6.79	5.05	ND	1.15	93	0.148
12/9,10/2009	51	7.02	4.79	ND	1.92	250	0.198
9/9,10/2009	50	8.94	5.00	0.306	2.46	304	0.436
6/9/2009	49	8.68	5.58	0.293	2.18	265	0.373
3/12/2009	48	8.17	5.02	0.179	1.97	212	0.236
12/11/2008	47	8.47	4.95	0.365	4.28	435	0.389
9/30/2008	46	8.84	5.56	ND	2.44	216	0.321
6/11/2008	45	7.29	6.69	0.322	2.37	94	0.201
3/12/2008	44	8.20	5.25	0.143	2.45	222	0.323
12/6/2007	43	9.30	6.63	0.345	1.54	152	0.209
9/12/2007	42	9.20	4.87	0.267	1.45	99	0.170
6/13/2007	41	7.80	5.80	0.882	1.67	137	0.192
3/15/2007	40	7.28	5.91	0.141	1.09	145	0.184
12/12/2006	39	6.99	5.54	16.300	1.83	161	0.180
9/11,12/2006	38	8.27	4.90	ND	6.22	211	0.263

HOOVER TREATED WOOD PRODUCTS
VPDES VA0088714
QUARTERLY GROUNDWATER SAMPLING SUMMARY
MW-9

Date Well Sampled	Report Number	Static Water Level FT	pH S.U.	Ammonia (as N) mg/L	Organic Carbon, Total mg/L	Total Dissolved Solids (Residue,	Conductivity mS/m
9/14,15/2010	54	7.29	5.72	ND	1.21	130	0.164
6/22,23/2010	53	6.21	5.44	ND	3.43	133	0.182
3/9/2010	52	5.66	5.36	ND	2.14	97	0.176
12/9/2009	51	5.58	4.99	ND	5.46	200	0.117
9/9,10/2009	50	6.72	5.53	ND	1.44	105	0.187
6/9/2009	49	6.22	5.40	ND	3.73	75	0.152
3/11/2009	48	6.42	5.50	0.133	2.02	141	0.152
12/11/2008	47	7.00	5.42	ND	5.28	176	0.170
9/17/2008	46	6.91	5.48	ND	1.74	122	0.190
6/11/2008	45	6.21	5.66	ND	3.48	36	0.112
3/12/2008	44	6.46	5.96	ND	2.84	96	0.119
12/6/2007	43	7.17	6.83	0.807	2.93	124	0.172
9/12/2007	42	7.24	5.36	0.059	1.35	94	0.171
6/13/2007	41	6.31	5.37	0.318	4.11	111	0.122
3/15/2007	40	6.05	5.79	ND	2.75	116	0.160
12/12/2006	39	5.80	5.56	ND	3.72	143	0.178
9/11,12/2006	38	6.27	5.34	0.080	4.83	118	0.186

HOOVER TREATED WOOD PRODUCTS
VPDES VA0088714
QUARTERLY GROUNDWATER SAMPLING SUMMARY
MW-10

Date Well Sampled	Report Number	Static Water Level FT	pH S.U.	Ammonia (as N) mg/L	Organic Carbon, Total mg/L	Total Dissolved Solids (Residue, filterable) mg/L	Conductivity mS/m
9/14,15/2010	54	10.89	6.30	0.264	2.22	126	0.175
6/22,23,24/2010	53	9.59	6.22	0.332	1.14	164	0.254
3/9/2010	52	8.55	6.17	0.107	1.42	116	0.234
12/9/2009	51	9.22	6.02	ND	4.17	222	0.181
9/9,10/2009	50	10.34	6.33	0.071	1.33	122	0.201
6/9/2009	49	9.62	6.29	0.077	1.74	124	0.226
3/11/2009	48	9.90	6.29	0.171	1.39	148	0.170
12/11/2008	47	10.70	6.15	0.068	1.56	122	0.157
9/17/2008	46	10.48	6.16	0.476	1.48	157	0.212
6/11/2008	45	9.15	6.20	0.222	1.66	116	0.176
3/12/2008	44	10.08	6.24	ND	1.42	113	0.186
12/6/2007	43	10.88	7.31	0.228	1.31	125	0.240
9/12/2007	42	10.75	6.19	0.650	1.45	128	0.268
6/13/2007	41	9.54	6.41	1.110	1.77	201	0.356
3/15/2007	40	9.25	6.12	1.320	2.00	179	0.290
12/12/2006	39	8.84	6.41	1.620	1.03	130	0.182
9/11,12/2006	38	9.87	6.24	0.306	1.39	90	0.199

HOOVER TREATED WOOD PRODUCTS
VPDES VA0088714
QUARTERLY GROUNDWATER SAMPLING SUMMARY
MW-11

Date Well Sampled	Report Number	Static Water Level FT	pH S.U.	Ammonia (as N) mg/L	Organic Carbon, Total mg/L	Total Dissolved Solids (Residue, filterable) mg/L	Conductivity mS/m
9/14,16/2010	54	11.25	6.20	46.000	5.68	428	0.747
6/22/2010	53	9.81	5.00	7.240	1.67	259	0.345
3/9,10/2010	52	8.60	4.36	4.110	2.34	336	0.627
12/9,10/2009	51	9.27	5.35	10.200	3.35	402	0.562
9/9,10/2009	50	10.65	5.87	34.000	4.75	366	0.796
6/9/2009	49	9.75	5.63	7.770	3.51	254	0.428
3/11/2009	48	10.00	5.85	29.100	3.41	299	0.496
12/11/2008	47	10.87	5.78	103.000	7.42	723	0.909
9/17/2008	46	10.77	5.89	35.200	4.72	471	0.848
6/11/2008	45	9.23	4.56	2.670	2.76	436	0.425
3/12/2008	44	10.18	5.62	18.700	3.30	352	0.558
12/6/2007	43	11.10	7.45	60.700	5.78	571	1.066
9/12/2007	42	11.03	5.68	74.000	3.79	324	0.713
6/13/2007	41	9.74	5.06	12.100	2.48	430	0.581
3/15/2007	40	9.28	5.00	5.610	3.49	437	0.688
12/12/2006	39	8.90	4.82	13.000	2.69	498	0.546
9/11,12/2006	38	10.13	5.49	24.500	4.02	415	0.706

HOOVER TREATED WOOD PRODUCTS
VPDES VA0088714
QUARTERLY GROUNDWATER SAMPLING SUMMARY
MW-12

Date Well Sampled	Report Number	Static Water Level FT	pH S.U.	Ammonia (as N) mg/L	Organic Carbon, Total mg/L	Total Dissolved Solids (Residue, filterable) mg/L	Conductivity mS/m
9/14,16/2010	54	8.59	6.59	20.400	2.45	203	0.441
6/22,23,24/2010	53	7.09	6.28	11.900	2.56	205	0.384
3/9/2010	52	5.97	6.04	14.300	2.40	141	0.504
12/9,10/2009	51	6.65	5.94	7.690	5.07	332	0.456
9/9,10/2009	50	8.04	6.47	31.300	2.57	249	0.504
6/9/2009	49	6.98	6.30	13.800	11.00	428	0.674
3/11/2009	48	7.49	6.15	64.100	36.90	2050	0.550
12/11/2008	47	8.41	6.21	ND	7.01	365	0.422
9/17/2008	46	8.22	6.58	39.700	6.07	279	0.845
6/11/2008	45	6.54	6.40	48.200	13.50	306	0.700
3/12/2008	44	7.65	6.21	32.400	8.24	324	0.698
12/6/2007	43	8.52	7.41	34.600	2.80	222	0.530
9/12/2007	42	8.30	6.26	65.000	2.87	208	0.566
6/13/2007	41	6.99	6.36	77.700	10.70	403	1.035
3/15/2007	40	6.52	6.06	23.400	6.18	340	0.530
12/12/2006	39	6.33	6.30	42.400	9.84	378	0.816
9/11,12/2006	38	7.50	6.40	40.200	5.30	302	0.950

HOOVER TREATED WOOD PRODUCTS
VPDES VA0088714
QUARTERLY GROUNDWATER SAMPLING SUMMARY
MW-13

Date Well Sampled	Report Number	Static Water Level FT	pH S.U.	Ammonia (as N) mg/L	Organic Carbon, Total mg/L	Total Dissolved Solids (Residue, filterable) mg/L	Conductivity mS/m
9/14,15/2010	54	11.30	5.47	ND	1.47	268	0.293
6/22,23/2010	53	9.90	5.22	0.166	ND	166	0.217
3/9/2010	52	8.64	4.92	0.062	1.20	160	0.283
12/9/2009	51	9.03	5.83	ND	1.34	320	0.300
9/9,10/2009	50	10.65	5.34	0.905	1.39	205	0.279
6/9/2009	49	9.62	5.59	0.081	1.65	209	0.299
3/11/2009	48	9.93	5.33	1.480	1.30	276	0.285
12/11/2008	47	10.79	5.25	1.000	1.80	300	0.270
9/17/2008	46	10.73	5.32	0.320	5.10	197	0.243
6/11/2008	45	9.19	5.34	0.490	1.30	72	0.222
3/12/2008	44	10.00	5.57	0.082	4.99	240	0.263
12/6/2007	43	11.07	7.05	1.960	1.77	225	0.316
9/12/2007	42	11.03	5.18	1.880	1.41	149	0.246
6/13/2007	41	9.77	5.12	0.454	1.48	167	0.223
3/15/2007	40	9.29	4.98	0.429	1.30	202	0.289
12/12/2006	39	8.81	5.26	5.030	ND	245	0.252
9/11,12/2006	38	10.04	5.59	0.459	1.38	194	0.238

HOOVER TREATED WOOD PRODUCTS
VPDES VA0088714
QUARTERLY GROUNDWATER SAMPLING SUMMARY
MW-14

Date Well Sampled	Report Number	Static Water Level FT	pH S.U.	Ammonia (as N) mg/L	Organic Carbon, Total mg/L	Total Dissolved Solids (Residue, filterable) mg/L	Conductivity mS/m
9/14,15/2010	54	10.43	5.28	1.190	6.04	106	0.116
6/22,23/2010	53	8.88	5.64	ND	ND	97	0.133
3/9/2010	52	7.25	5.18	ND	ND	67	0.124
12/9/2009	51	6.75	4.93	ND	ND	170	0.114
9/9,10/2009	50	9.77	5.23	ND	ND	72	0.104
6/9/2009	49	8.40	5.51	ND	ND	74	0.105
3/11/2009	48	8.92	5.13	0.060	ND	83	0.097
12/11/2008	47	10.02	5.11	ND	ND	244	0.092
9/17/2008	46	9.89	5.34	ND	ND	107	0.108
6/11/2008	45	8.00	6.67	0.341	ND	50	0.083
3/12/2008	44	8.85	5.36	ND	ND	69	0.096
12/6/2007	43	10.15	6.99	0.109	ND	91	0.107
9/12/2007	42	10.12	5.11	0.053	ND	46	0.106
6/13/2007	41	8.63	5.23	0.277	ND	80	0.120
3/15/2007	40	7.89	6.12	155.000	ND	87	0.114
12/12/2006	39	7.65	5.29	ND	ND	99	0.107
9/11,12/2006	38	9.07	6.92	ND	ND	67	0.209

Please print or type in the unshaded areas only.

EPA ID Number (*copy from Item 1 of Form 1*)
VAD988190021

Form Approved. OMB No. 2040-0086
Approval expires 5-31-92

FORM 2F NPDES

U.S. Environmental Protection Agency
Washington, DC 20460

Application for Permit to Discharge Storm Water Discharges Associated with Industrial Activity

Paperwork Reduction Act Notice

Public reporting burden for this application is estimated to average 28.6 hours per application, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate, any other aspect of this collection of information, or suggestions for improving this form, including suggestions which may increase or reduce this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 1200 Pennsylvania Avenue, NW, Washington, DC 20460, or Director, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

I. Outfall Location

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. Outfall Number (*list*)	B. Latitude			C. Longitude			D. Receiving Water (*name*)
01	38	0	40.89	77	21	57.53	Mattaponi River via un-named swamp
03	38	0	41.20	77	22	4.05	Mattaponi River via un-named swamp
04	38	0	30.20	77	21	58.73	Mattaponi River via un-named swamp
06	38	0	30.02	77	22	2.69	Mattaponi River via un-named swamp

II. Improvements

A. Are you now required by any Federal, State, or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

1. Identification of Conditions, Agreements, Etc.	2. Affected Outfalls		3. Brief Description of Project	4. Final Compliance Date	
	number	source of discharge		a. req.	b. proj.
None					

B: You may attach additional sheets describing any additional water pollution (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

III. Site Drainage Map

Attach a site map showing topography (or indicating the outline of drainage areas served by the outfalls(s) covered in the application if a topographic map is unavailable) depicting the facility including: each of its intake and discharge structures; the drainage area of each storm water outfall; paved areas and buildings within the drainage area of each storm water outfall, each known past or present areas used for outdoor storage of disposal of significant materials, each existing structural control measure to reduce pollutants in storm water runoff, materials loading and access areas, areas where pesticides, herbicides, soil conditioners and fertilizers are applied; each of its hazardous waste treatment, storage or disposal units (including each area not required to have a RCRA permit which is used for accumulating hazardous waste under 40 CFR 262.34); each well where fluids from the facility are injected underground; springs, and other surface water bodies which received storm water discharges from the facility.

Continue on Page 2

EPA ID Number (*copy from Item 1 of Form 1*)
VAD988190021 Outfall 06

Form Approved. OMB No. 2040-0086
Approval expires 5-31-92

VII. Discharge information *(Continued from page 3 of Form 2F)*

Part A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite		
Oil and Grease	BRL	N/A			1	
Biological Oxygen Demand (BOD5)	9.40 mg/L				1	
Chemical Oxygen Demand (COD)	35.1 mg/L				1	
Total Suspended Solids (TSS)	776 mg/L				1	
Total Nitrogen	BRL				1	
Total Phosphorus	2.84 mg/L				1	
pH	Minimum 6.22	Maximum 6.22	Minimum	Maximum	1	

Part B – List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite		
Arsenic, Total	0.078 mg/L				1	
Chromium, Total	0.105 mg/L				1	
Copper, Total	0.109 mg/L				1	
Zinc, Total	0.218 mg/L				1	
Hardness(CACO3)	76 mg/L				1	
Ammonia (as N)	3.64 mg/L				1	

Continue on Reverse

Continued from the Front

Part C - List each pollutant shown in Table 2F-2, 2F-3, and 2F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite		
Boron, Total	1.23 mg/L				1	
Iron, Total	25.5 mg/L				1	
Lead, Total	0.032 mg/L				1	
Formaldehyde	0.077 mg/L				1	

Part D – Provide data for the storm event(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm Event *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*

7. Provide a description of the method of flow measurement or estimate.

Continued from the Front

IV. Narrative Description of Pollutant Sources

A. For each outfall, provide an estimate of the area (include units) of imperious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.

Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
01	13,595 sqft	307,607 sqft			
03	78,446 sqft	331,628 sqft			
04	12,627 sqft	209,607 sqft			
06	29,984 sqft	290,906 sqft			

B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed to minimize contact by these materials with storm water runoff; materials loading and access areas, and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

The only significant materials exposed to storm water which leaves the property are treated and untreated wood. Some wood is stored outside and is exposed to rain. The wood exposed can be categorized as:
A) Untreated "White" wood
B) Preservative treated wood (CCA & ACQ)*
C) Pyro-Guard interior fire retardant treated wood*
D) Exterior Fire-X exterior fire retardant treated wood*
*All finished inventory of kiln dried after treatment (KDAT) wood is protected from rain by the application of a bag over wood. Most finished product is stored under sheds which also protects from rain. All of the above materials are moved and stored through out the property during production. No pesticides, herbicides, soil conditioners, or fertilizers are applied to the property. All liquid storage tanks are protected by secondary containment with rain water collected from these area and used as process water.

C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in storm water runoff; and a description of the treatment the storm water receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.

Outfall Number	Treatment	List Codes from Table 2F-1
01	None	
03	None	
04	None	
06	None	

V. Nonstormwater Discharges

A. I certify under penalty of law hat the outfall(s) covered by this application have been tested or evaluated for the presence of nonstormwater discharges, and that all nonstormwater discharged from these outfall(s) are identified in either an accompanying Form 2C or Form 2E application for the outfall.

Name and Official Title (type or print)	Signature	Date Signed
Randy Edmondson Mgr of Eng. Services		3-14-2011

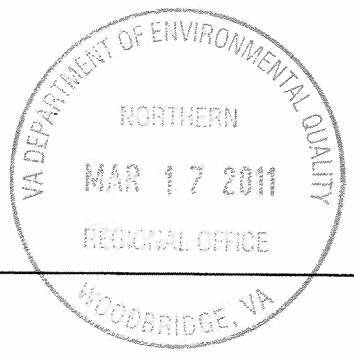
B. Provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.

During the summer months with dry conditions each outfall was visually observed and checked for no flow (record in SWPPP). Also the P.E. that certifies the SWPPP visually checks the outfalls during his annual visit, and the Facility Operations Manager visually checks the outfalls at least once each month.

VI. Significant Leaks or Spills

Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.

None



EPA ID Number *(copy from Item 1 of Form 1)*
VAD988190021

VII. Discharge Information

A, B, C, & D: See instructions before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided.
Table VII-A, VII-B, VII-C are included on separate sheets numbers VII-1 and VII-2.

E. Potential discharges not covered by analysis – is any toxic pollutant listed in table 2F-2, 2F-3, or 2F-4, a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☐ Yes (*list all such pollutants below*) ☑ No (*go to Section IX*)

VIII. Biological Toxicity Testing Data

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☑ Yes (*list all such pollutants below*) ☐ No (*go to Section IX*)

From current VPDES permit VA0088714 Section E.1.a.1 -

The acute multi-dilution No Observed Adverse Effect Concentration (NOAEC) tests to use are:

48-Hour Static Acute test using Ceriodaphnia dubia
48-Hour Static Acute test using Pimephales promelas

These acute tests shall be conducted using 5 geometric dilutions of effluent with a minimum of 4 replicates, with 5 organisms in each. The NOAEC as determined by hypothesis testing shall be converted to TUa (Acute Toxicity Units) for reporting where TUa = 100/NOAEC. The LC50 should also be determined and noted on the submitted report. Tests in which control survival is less than 90% are not acceptable.

Three(3) storm events have been tested with 2 outfalls each since the current permit started and five(5) storm events with 2 outfalls each where conducted with alternating test subjects on the previous permit. Since 4-15-2002 a total of twenty-two (22) acute test have been performed with all test results at 100% survival!

IX. Contract Analysis Information

Were any of the analyses reported in Item VII performed by a contract laboratory or consulting firm?

☑ Yes (*list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below*) ☐ No (*go to Section X*)

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed
Southern Petroleum Laboratories, Inc. Houston Lab (SPL) EPA Lab ID = TX00066	8880 Interchange Drive Houston, TX 77054	800-969-6775 / 713-660-0901	BOD, Ammonia (as N), COD, Total Kjeladahl Nitrogen, Total Organic Nitrogen, Total Organic Carbon, TSS, Nitrate-Nitrite, Total Phosphorus (as P), Oil & Grease, Arsenic, Boron, Chromium, Copper, Iron, Lead, Zinc, pH
SPL Lafayette Lab	500 Ambassador Caffery Parkway Scott, LA 70583	337-237-4775	Formaldehyde

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. Name & Official Title (*Type Or Print*)	B. Area Code and Phone No.
Randy Edmondson Manager of Engineering Services	(706) 595-7355
C. Signature	D. Date Signed
	2-24-2011

EPA ID Number (*copy from Item 1 of Form 1*)
VAD988190021 Outfall 01

Form Approved. OMB No. 2040-0086
Approval expires 5-31-92

VII. Discharge information *(Continued from page 3 of Form 2F)*

Part A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite		
Oil and Grease	BRL	N/A			1	
Biological Oxygen Demand (BOD5)	6.11 mg/L				1	
Chemical Oxygen Demand (COD)	48.6 mg/L				1	
Total Suspended Solids (TSS)	745 mg/L				1	
Total Nitrogen	5.67 mg/L				1	
Total Phosphorus	3.02 mg/L				1	
pH	Minimum 6.12	Maximum 6.12	Minimum	Maximum	1	

Part B – List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite		
Arsenic, Total	0.118 mg/L				1	
Chromium, Total	0.066 mg/L				1	
Copper, Total	0.116 mg/L				1	
Zinc, Total	0.231 mg/L				1	
Hardness(CACO3)	104 mg/L				1	
Ammonia (as N)	1.54 mg/L				1	

Continued from the Front

Part C - List each pollutant shown in Table 2F-2, 2F-3, and 2F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite		
Boron, Total	1.53 mg/L				1	
Iron, Total	7.68 mg/L				1	
Lead, Total	0.015 mg/L				1	
Formaldehyde	0.083 mg/L				1	

Part D – Provide data for the storm event(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm Event *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*

7. Provide a description of the method of flow measurement or estimate.

EPA ID Number (*copy from Item 1 of Form 1*)
VAD988190021 Outfall 03

Form Approved. OMB No. 2040-0086
Approval expires 5-31-92

VII. Discharge information *(Continued from page 3 of Form 2F)*

Part A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite		
Oil and Grease	12.0 mg/L	N/A			1	
Biological Oxygen Demand (BOD5)	10.1 mg/L				1	
Chemical Oxygen Demand (COD)	29.7 mg/L				1	
Total Suspended Solids (TSS)	928 mg/L				1	
Total Nitrogen	5.11 mg/L				1	
Total Phosphorus	0.88 mg/L				1	
pH	Minimum 7.22	Maximum 7.22	Minimum	Maximum	1	

Part B – List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite		
Arsenic, Total	0.136 mg/L				1	
Chromium, Total	0.067 mg/L				1	
Copper, Total	0.113 mg/L				1	
Zinc, Total	0.462 mg/L				1	
Hardness(CACO3)	92 mg/L				1	
Ammonia (as N)	2.24 mg/L				1	

Continued from the Front

Part C - List each pollutant shown in Table 2F-2, 2F-3, and 2F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite		
Boron, Total	0.676 mg/L				1	
Iron, Total	4.55 mg/L				1	
Lead, Total	0.015 mg/L				1	
Formaldehyde	0.073 mg/L				1	

Part D – Provide data for the storm event(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm Event *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*

7. Provide a description of the method of flow measurement or estimate.

EPA ID Number (*copy from Item 1 of Form 1*)
VAD988190021 Outfall 04

Form Approved. OMB No. 2040-0086
Approval expires 5-31-92

VII. Discharge information *(Continued from page 3 of Form 2F)*

Part A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite		
Oil and Grease	BRL	N/A			1	
Biological Oxygen Demand (BOD5)	3.09 mg/L				1	
Chemical Oxygen Demand (COD)	16.2 mg/L				1	
Total Suspended Solids (TSS)	89.2 mg/L				1	
Total Nitrogen	BRL				1	
Total Phosphorus	BRL				1	
pH	Minimum 6.78	Maximum 6.78	Minimum	Maximum	1	

Part B – List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite		
Arsenic, Total	0.010 mg/L				1	
Chromium, Total	0.009 mg/L				1	
Copper, Total	0.015 mg/L				1	
Zinc, Total	0.036 mg/L				1	
Hardness(CACO3)	48 mg/L				1	
Ammonia (as N)	1.82 mg/L				1	

Continued from the Front

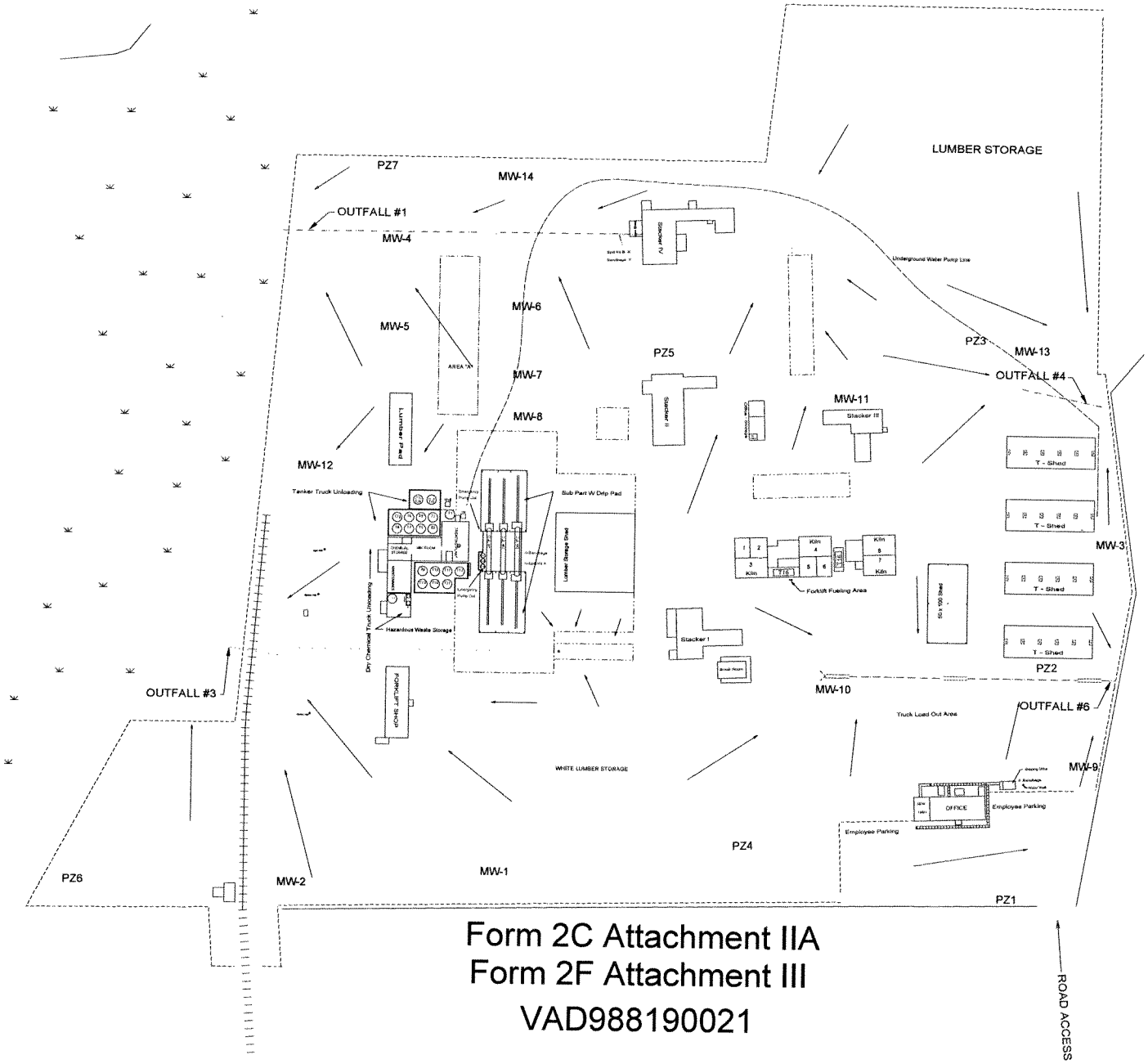
Part C - List each pollutant shown in Table 2F-2, 2F-3, and 2F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 20 Minutes	Flow-Weighted Composite		
Boron, Total	0.138 mg/L				1	
Iron, Total	1.85 mg/L				1	
Lead, Total	BRL				1	
Formaldehyde	0.060 mg/L				1	

Part D – Provide data for the storm event(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm Event *(In minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*

7. Provide a description of the method of flow measurement or estimate.



Form 2C Attachment IIA
Form 2F Attachment III
VAD988190021